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This section of the FEDERAL REGISTER contains regulatory documents having general applicability and legal effect, most of which are keyed to and codified in the Code of Federal Regulations, which is published under 50 titles pursuant to 44 U.S.C. 1510.

The Code of Federal Regulations is sold by the Superintendent of Documents. Prices of new books are listed in the first FEDERAL REGISTER issue of each week.

DEPARTMENT OF AGRICULTURE

Federal Crop Insurance Corporation

7 CFR Part 457

RIN 0563–AC07

Common Crop Insurance Regulations; Basic Provisions

AGENCY: Federal Crop Insurance Corporation, USDA.

ACTION: Final rule.

SUMMARY: The Federal Crop Insurance Corporation (FCIC) finalizes the Common Crop Insurance Regulations; Basic Provisions to conform to the requirements of section 780 of the Agriculture, Rural Development, Food and Drug Administration, and Related Agencies Appropriations Act, 2006 (2006 Appropriations Act) regarding written agreements and the use of similar agricultural commodities.

DATES: *Effective Date:* This rule is effective June 29, 2006.

FOR FURTHER INFORMATION CONTACT: Erin Reid, Risk Management Specialist, Product Management, Product Administration and Standards Division, Risk Management Agency, United States Department of Agriculture, 6501 Beacon Drive, Stop 0812, Room 421, Kansas City, MO 64133–4676, telephone (816) 926–7730.

SUPPLEMENTARY INFORMATION:

Executive Order 12866

The Office of Management and Budget (OMB) has determined that this rule is non-significant for the purposes of Executive Order 12866 and, therefore, it has not been reviewed by OMB.

Paperwork Reduction Act of 1995

Pursuant to the provisions of the Paperwork Reduction Act of 1995 (44 U.S.C. chapter 35), the collections of information in this rule have been approved by OMB under control number 0563–0053 through November 30, 2007.

Government Paperwork Elimination Act (GPEA) Compliance

FCIC is committed to compliance with the GPEA, which requires Government agencies, in general, to provide the public with the option of submitting information or transacting business electronically to the maximum extent possible. FCIC requires that all reinsured companies be in compliance with the Freedom to E-File Act and section 508 of the Rehabilitation Act.

Unfunded Mandates Reform Act of 1995

Title II of the Unfunded Mandates Reform Act of 1995 (UMRA) establishes requirements for Federal agencies to assess the effects of their regulatory actions on State, local, and tribal governments and the private sector. This rule contains no Federal mandates (under the regulatory provisions of title II of the UMRA) for State, local, and tribal governments or the private sector. Therefore, this rule is not subject to the requirements of sections 202 and 205 of UMRA.

Executive Order 13132

It has been determined under section 1(a) of Executive Order 13132, Federalism, that this rule does not have sufficient implications to warrant consultation with the States. The provisions contained in this rule will not have a substantial direct effect on States, or on the relationship between the national government and the States, or on the distribution of power and responsibilities among the various levels of government.

Regulatory Flexibility Act

FCIC certifies that this regulation will not have a significant economic impact on a substantial number of small entities. Written agreement requirements for the Federal crop insurance program are the same for all producers regardless of the size of their operations. For instance, all producers requesting this type of written agreement must submit production history for at least the most recent three crop years in which the crop was planted during the base period, if they produced the crop for three years. If any producer has not produced the crop for three years, he or she may submit evidence of production history for a similar crop, or for a combination of production history for the crop and a similar crop, provided a total of three years of production history is provided. Whether a producer has 10 acres or 100 acres there is no difference in the kind of information required for requesting a written agreement. To ensure crop insurance is available to small entities, the Federal Crop Insurance Act authorizes FCIC to waive collection of administrative fees from limited resource farmers. FCIC believes this change helps ensure that small entities are given the same opportunities as large entities to manage their risks through the use of crop insurance. A Regulatory Flexibility Analysis has not been prepared since this regulation does not have an impact on small entities, and, therefore, this regulation is exempt from the provisions of the Regulatory Flexibility Act (5 U.S.C. 605).

Federal Assistance Program

This program is listed in the Catalog of Federal Domestic Assistance under No. 10.450.

Executive Order 12372

This program is not subject to the provisions of Executive Order 12372, which require intergovernmental consultation with State and local officials. See the Notice related to 7 CFR part 3015, subpart V, published at 48 FR 29115, June 24, 1983.

Executive Order 12988

This interim rule has been reviewed in accordance with Executive Order 12988 on civil justice reform. The provisions of this rule will not have a retroactive effect. The provisions of this rule will preempt State and local laws to the extent such State and local laws are inconsistent herewith. With respect to any direct action taken by FCIC or to require the insurance provider to take specific action under the terms of the crop insurance policy, the administrative appeal provisions published at 7 CFR part 11 must be exhausted before any action against FCIC for judicial review may be brought.

Environmental Evaluation

This action is not expected to have a significant economic impact on the quality of the human environment, health, or safety. Therefore, neither an Environmental Assessment nor an

Environmental Impact Statement is needed.

Background

This rule finalizes changes to the Common Crop Insurance Regulations; Basic Provisions, mandated by the 2006 Appropriations Act, that were published by FCIC on November 30, 2005, as a notice of interim rulemaking in the **Federal Register** at 70 FR 71749—71751. The public was afforded 60 days to submit written comments and opinions. The email address listed on the interim rule and the Federal eRulemaking Portal address were not operational during that time period, therefore, FCIC published a notice in the **Federal Register** at 71 FR 8923 on February 22, 2006, extending the comment period for an additional 30 days, until March 24, 2006.

A total of 11 comments were received from 4 commenters. The commenters were a reinsured company, an attorney, an agent, and an insurance service organization. The comments received and FCIC's responses are as follows:

Comment: A commenter stated that under the Administrative Procedure Act (APA), a substantive rule becomes effective 30 days after ''the required publication'' unless good cause is found by the agency. FCIC contends good cause existed and, therefore, the Interim Rule ostensibly became effective upon filing with the Office of the Federal Register (OFR). Filing a rule with the OFR is not ''publication'' within the meaning of APA; the appearance of the rule in the **Federal Register** is. Though the Interim Rule may now be effective, its effective date was November 30th, the date of publication, not November 25th, the date of filing.

Response: There have been instances where good cause has been shown to allow a rule to be effective upon filing with the **Federal Register**. However, with respect to this rule, this issue is moot because, not only was it filed before November 30, 2005, it was published on November 30, 2005. Therefore, there can be no dispute that the interim rule was effective for crops with a contract change date on or after November 30, 2005.

Comment: One commenter stated they believe written agreements which represent an exception to the standards established by FCIC, are actuarially unsound and expose both FCIC and approved insurance providers to unnecessary risks and moral hazard. In addition and recognizing the statutory mandate to which FCIC is subject, they oppose further expansion of written agreements.

Response: No written agreement can be approved unless there is actuarially sound data acceptable to FCIC upon which to base coverage and determine the appropriate premium rate. The interim rule and this final rule simply allow data from other similar crops to be used. It does not change the standards that must be met for RMA to offer and approve a written agreement. Further, FCIC is monitoring the performance of its written agreements to ensure that program integrity is protected and appropriate changes are made when problems arise. If the commenter has specific examples where written agreements are not properly underwritten, the commenter should notify the RMA Regional Office serving the area so appropriate action can be taken.

Comment: Two commenters expressed concern that FCIC and the industry will be insuring a producer who has never grown the crop before in a county in which the crop has rarely been raised before. Because the crop is new to the area, the county extension office might not be familiar with the growing requirements of the crop (For example, the best time to apply chemicals, fertilizers, etc.). Insuring crops that have rarely been grown in a county by a producer who has never grown the crop before is not actuarially sound. One commenter stated that FCIC is mandated to have an actuarially sound insurance program and questioned how the insurable risk is determined for a crop that has not been grown by the person making the request. The commenters stated that a person who had never grown the crop before would still be eligible for the Noninsured Crop Disaster Assistance Program (NAP); therefore, the producer would not be without a safety net until they accumulate the required three years of history.

Response: Although a particular crop may not have been grown extensively in a county, growing conditions in the county are generally known, including rainfall amounts and other weather conditions, soil productivity, length of growing season, etc. The major risk factors are also generally known in the county, such as freeze, adverse weather, etc. Information regarding growing requirements and risk susceptibility for a particular crop is also generally available from other sources, even if not personally known to the county extension office. Since the information needed to determine crop adaptability is generally known or readily available, it is possible to determine the proper coverage and underwriting standards for the written agreement. Further, the new provisions require evidence of three years of verifiable production records from the producer for a crop with similar growing requirements. This production data, an assessment of the likely risks and the effect on the crop, and other generally available information are then used to offer written agreements in an actuarially sound manner. FCIC agrees if insurance is not offered, NAP coverage may be available. However, providing insurance coverage at actuarially sound rates gives the producer the opportunity to tailor the coverage to better meet the risk management needs of the producer.

Comment: One commenter asked whether the ''similar crop'' provisions apply to all crops/plans using the Basic Provisions or only to those crops under the actual production history (APH) plan of insurance. The commenter states while section 18(f)(2)(i) applies only to policies under APH, section 18(f)(2)(ii) is also revised by the Written Agreement Amendatory Endorsement and refers to ''Acceptable production records for at least the most recent three crop years* * *'', which could apply to non-APH crops.

Response: FCIC agrees that the provision as drafted could suggest that section 18(f)(2)(i) only applies to APH crops. However, this is not the intent. The requirement to provide a completed APH form was intended to apply only to APH and all the other requirements, including the new provisions to require evidence of three years of verifiable production records was intended to apply to all crop policies that authorize written agreements. The provisions have been revised for clarification.

Comment: One commenter stated even though the Written Agreement Amendatory Endorsement amends sections 18(f)(2)(i) & (ii) of the Basic Provisions, it does not take priority over the applicable Crop Provisions that might have specific provisions that replace or revise those in the Basic Provisions. For example, the various Income Protection (IP) crop provisions state written agreement provisions do not apply for IP policies. Presumably the Written Agreement Amendatory Endorsement should not be considered to supersede the Crop Provisions in this case. The commenter states this could be misunderstood since the order of precedence at the beginning of the Basic Provisions does not address policy endorsements other than the CAT Endorsement, which takes priority over all other policy provisions.

Response: Unlike other endorsements that modify existing terms of the Basic Provisions or Crop Provisions only when the endorsement is selected by the

producer, such as the Catastrophic Risk Protection Endorsement or the Nursery Rehabilitation Endorsement, the Written Agreement Amendatory Endorsement modifies the existing terms of the Basic Provision for all producers. It operates no different than any other change made and incorporated directly into the Basic Provisions. Because the terms of the Written Agreement Amendatory Endorsement are incorporated into all producers' Basic Provisions, its terms will apply to all crop policies that authorize written agreements. It was referred to as an endorsement only as a means to allow its distribution to producers without having to copy and redistribute the entire Basic Provisions. However, FCIC realizes that using the term ''endorsement'' implies that it has the same meaning as other existing endorsements, which do affect the priority. Therefore, FCIC is removing the term ''endorsement'' and is now calling it the ''Written Agreement Amendment.''

Comment: Two commenters questioned why FCIC chose to keep the existing three-year production record requirement with the addition of the similar crop provisions. Actuarial data is available for these similar crops so markets are already known, yield potential is already known, and quality adjustment factors are already known. One commenter recommended requiring one year of production records. One year of production records may not reflect the producer's ability to grow the crop in the long term, but it would at least provide an indication of the producer's potential and of the expected risk as a basis for accepting or rejecting the request. One commenter stated having to get three years of production records for a specific crop may require the producer to go back many years.

Response: FCIC agrees that if the producer has been insuring the similar crop in the county or area for at least the three previous crop years, there is no need to provide the actual production records. Such records would only be useful in determining whether a similar crop can successfully be produced in the area and would not be used for the actual basis for insurance. Insurance would be based on information relating to the crop to be insured in an area that is similar and in which the crop is already insured. Therefore, for similar crops that have been insured, certified yields will be sufficient. However, the producer must still retain those production records under the terms of the crop insurance policy applicable to such similar crop and the producer may be required to produce such records.

Comment: One commenter stated if the similar crop provisions are retained, there are questions and concerns about exactly what constitutes a similar crop. For instance: (1) Would a farmer whose previous experience in growing wheat be given a written agreement to insure sunflowers (if the other requirements are met also) because they are both row crops; (2) Would apple history serve as the basis for a written agreement to insure pecans because they are both tree crops; and (3) Would burley tobacco be considered similar to other tobacco types even though the production practices and values are not similar? Another commenter raised concerns about exactly what constitutes a ''similar crop.'' The commenter recommended tightening the definition of ''similar crop'' or adding more details in the Written Agreement Handbook.

Response: The type of crop, i.e. row crop, tree crop, etc., is only one of the factors to be considered when determining whether the crop is similar. Other factors to be considered are the growing season, agronomic conditions (e.g. comparable soil and water needs) and risk factors associated with the crops production. If the applicable factors are comparable, then the crop can be considered a similar crop. FCIC believes that these factors provide sufficient guidance to determine a similar crop and that tightening the provisions even further would be too restrictive. No change has been made.

Comment: A commenter asked whether three years of data are sufficient to establish reliable yield history and enable FCIC to calculate the appropriate premium rates. The commenter recommended the requirement be increased to five years of data because a request for a written agreement may involve the insuring of a crop not already included in the crop insurance program.

Response: Insurance can not be provided for a crop unless there is already a crop insurance program in place for it in another county. Therefore, this additional data is also used in determining the appropriate premium rate. The three years of production records from the producer is intended to show that the crop, or a crop with similar characteristics, can be produced in the county or area and allow the premium rate offered to the producer to be refined for that producer. Requiring more years of data would unnecessarily reduce the ability to make insurance offers to producers. If there is not sufficient information available to determine an appropriate premium rate, the written agreement is denied. No change has been made.

Comment: A commenter indicated written agreement requests utilizing ''similar crops'' had been accepted in the past and asked if it is possible to tell how many of those requests were approved and how many were rejected.

Response: Data is kept regarding the number of written agreement requests for crops in counties without actuarial documents and how many of those were denied. However, there is no breakdown between those submitted with verifiable production records for a similar crop and those submitted with verifiable production records for the crop to be insured. In 2001 (one year when similar crop data was accepted), the RMA Regional Offices received 4,276 requests and of those requests 2,968 were approved and accepted by the insured, for 69 percent. In 2005 (one year when similar crop data was not accepted), the Regional Offices received 1,638 requests and of those requests 1,192 were approved and accepted by the insured, for 73 percent. However, this comparison may not be reflective of what may take place under the new similar crop provisions because the standards for determining what constitutes a similar crop are different.

Comment: A commenter recommended that the rule distinguish between irrigated and non-irrigated crops. A distinction also should be made between crops produced using organic methods. Moreover, even with the criteria established by the Interim Rule, opinions may vary as to whether a crop is similar. The commenter was also aware FCIC has developed or is developing a chart that identifies the ''requested crop'' and the ''similar crops.'' The commenter notes some crops have multiple ''similar crops'' whereas others have only one ''similar crop.'' Because the chart is an agency statement of general or particular applicability and future effect designed to implement, interpret, or prescribe law or policy, the commenter considers it to be a substantive rule that must be published for public comment.

Response: FCIC agrees that irrigated and non-irrigated practices or organic and non-organic practices should be distinguished and reported on the request for a written agreement. However, each situation must be evaluated on a case-by-case basis because there may be instances where a different practice may perform just as well or better and would permit approval of the written agreement. FCIC does not agree procedures specifying which crops are considered to be similar have to be published for public comment. The chart is for informational purposes only and developed using the

standards that have been established through the rulemaking process. The chart will not have the force of law or policy because there may be circumstances where the designated similar crop on the chart may not be appropriate because of unique circumstances on the farm. It is still up to the approved insurance provider and FCIC to determine whether the crop qualifies as a similar crop.

Comment: A commenter suggested rewriting the parenthetical phrase in section 18(f)(2)(i)(B)(*1*)(*iii*) so the word ''needs'' does not follow the list-ending ''etc.'' The commenter suggested rewriting the parenthetical as ''(e.g., comparable needs for water, soil, etc.)'.

Response: FCIC agrees with the commenter and has revised redesignated section 18(f)(2)(ii)(E) accordingly.

In addition to the changes listed above, FCIC has determined verifiable production records from the crop or similar crop planted in the area can be used if a producer has not actually planted the crop or similar crop in the county. There may be cases where the farm crosses county lines or the more representative planting of the insured crop or similar crop is located across county lines and limiting the records to the insured crop or similar crop planted in the county may be too restrictive. Section 508(a)(4)(B) of the Act authorizes FCIC to ''offer to enter into a written agreement with an individual producer operating in the area for insurance coverage.'' The Basic Provisions define ''area'' as ''Land surrounding the insured acreage with geographic characteristics, topography, soil types and climatic conditions similar to the insured acreage.'' Using this definition will add the needed flexibility to use the best available records to establish insurance while still ensuring the producer has the capability of producing the crop or a similar crop in the county or area where the producer intends to produce the insured crop.

Good cause is shown to make this rule effective upon publication in the **Federal Register.** Good cause exists when the 30 day delay in the effective date is impracticable, unnecessary, or contrary to the public interest.

With respect to the provisions of this rule, it would be contrary to the public interest to delay its implementation. The changes made by this rule clarify existing provisions to ensure that written agreements based on similar crops are implemented in an actuarially sound manner and to eliminate any potential confusion regarding the requirements for such written agreements. Delaying the implementation of these provisions, which make a sounder, more stable program, would be contrary to the public interest.

If FCIC were required to delay the implementation of this rule until 30 days after the date it is published, the provisions of this rule could not be implemented until the next crop year for those crops having a contract change date prior to the effective date of this publication.

For the reasons stated above, good cause exists to make these policy changes effective upon publication in the **Federal Register.**

List of Subjects in 7 CFR Part 457

Crop insurance, Reporting and recordkeeping requirements.

Final Rule

■ Accordingly, as set forth in the preamble, the Federal Crop Insurance Corporation amends 7 CFR part 457 effective for the 2007 and succeeding crop years for all crops with a contract change date on or after the effective date of this rule and for the 2008 and succeeding crop years for all crops with a contract change date prior to the effective date of this rule, as follows:

PART 457—COMMON CROP INSURANCE REGULATIONS

■ 1. The authority citation for 7 CFR part 457 continues to read as follows:

Authority: 7 U.S.C. 1506(1), 1506(p).

§ 457.8 [Amended]

■ 2. Amend § 457.8 by revising sections 18(f)(2)(i) and (ii) to read as follows:

18. Written Agreements

* * * * *

(f) * * *

(2) * * *

(i) For a crop you have previously planted in the county or area for at least three years:

(A) A completed APH form (only for crops that require APH) based on verifiable production records for at least the three most recent crop years in which the crop was planted; and

(B) Verifiable production records for at least the three most recent crop years in which the crop was planted:

(*1*) The verifiable production records do not necessarily have to be from the same physical acreage for which you are requesting a written agreement; and

(*2*) Verifiable production records do not have to be submitted if you have insured the crop in the county or area for at least the previous three crop years and have certified the yields on the applicable production reports or the yields are based on your insurance claim (although you are not required to submit production records, you still must maintain production records in accordance with section 21);

(ii) For a crop you have not previously planted in the county or area for at least three years:

(A) A completed APH form (only for crops that require APH) based on verifiable production records for at least the three most recent crop years for a similar crop from acreage:

(*1*) In the county; or

(*2*) In the area if you have not produced the crop in the county; and

(B) Verifiable production records for at least the three most recent crop years in which the similar crop was planted:

(*1*) The verifiable production records for the similar crop do not necessarily have to be from the same physical acreage for which you are requesting a written agreement; and

(*2*) Verifiable production records do not have to be submitted if you have insured the similar crop for at least the three previous crop years and have certified the yields on the applicable production reports or the yields are based on your insurance claim (although you are not required to submit production records, you still must maintain production records in accordance with section 21);

(C) If you have at least one year of production records, but less than three years of production records, for the crop in the county or area but have production records for a similar crop in the county or area such that the combination of both sets of records results in at least three years of production records, you must provide the information required in sections 18(f)(2)(i)(A) & (B) for the years you grew the crop in the county or area and the information required in sections 18(f)(2)(ii)(A) & (B) regarding the similar crop for the remaining years; and

(D) A similar crop to the crop for which a written agreement is being requested must:

(*1*) Be included in the same category of crops, e.g., row crops (including, but not limited to, small grains, coarse grains, and oil seed crops), vegetable crops grown in rows, tree crops, vine crops, bush crops, etc., as defined by FCIC;

(*2*) Have substantially the same growing season (i.e., normally planted around the same dates and harvested around the same dates);

(*3*) Require comparable agronomic conditions (e.g., comparable needs for water, soil, etc.); and

(*4*) Be subject to substantially the same risks (frequency and severity of loss would be expected to be comparable from the same cause of loss);

* * * * *

Signed in Washington, DC, on June 23, 2006.

Eldon Gould,

Manager, Federal Crop Insurance Corporation.

[FR Doc. 06–5809 Filed 6–28–06; 8:45 am]

BILLING CODE 3410–08–P

DEPARTMENT OF AGRICULTURE

Animal and Plant Health Inspection Service

9 CFR Part 78

[Docket No. APHIS–2006–0001]

Brucellosis in Cattle; State and Area Classifications; Idaho

AGENCY: Animal and Plant Health Inspection Service, USDA.

ACTION: Affirmation of interim rule as final rule.

SUMMARY: We are adopting as a final rule, without change, an interim rule that amended the brucellosis regulations concerning interstate movement of cattle by changing the classification of Idaho from Class Free to Class A. That action was necessary to prevent the interstate spread of brucellosis.

DATES: Effective on June 29, 2006, we are adopting as a final rule the interim rule that became effective on January 12, 2006.

FOR FURTHER INFORMATION CONTACT: Dr. Debra Donch, National Brucellosis Epidemiologist, National Center for Animal Health Programs, VS, APHIS, 4700 River Road Unit 43, Riverdale, MD 20737–1231; (301) 734–6954.

SUPPLEMENTARY INFORMATION:

Background

Brucellosis is a contagious disease caused by bacteria of the genus *Brucella*. The brucellosis regulations, contained in 9 CFR part 78 (referred to below as the regulations), provide a system for classifying States or portions of States according to the rate of *Brucella* infection present and the general effectiveness of a brucellosis control and eradication program. The classifications are Class Free, Class A, Class B, and Class C. States or areas that do not meet the minimum standards for Class C are required to be placed under Federal quarantine.

In an interim rule [1] effective January 12, 2006, and published in the **Federal Register** on January 19, 2006 (71 FR 2991–2993, Docket No. APHIS–2006–0001), we amended § 78.41 of the regulations by changing the classification of Idaho from Class Free to Class A. That action was necessary to prevent the interstate spread of brucellosis.

Comments on the interim rule were required to be received on or before March 20, 2006. We received two comments by that date. One comment was from a private citizen who questioned why the affected cattle had not been vaccinated for brucellosis. Although vaccination can be effective to some degree in preventing the transmission and spread of the *Brucella* bacteria, it is not 100 percent effective; therefore, disease transmission may still occur even though a herd is vaccinated. The commenter also objected to cattle being allowed to graze on publicly owned land. This issue is not within the scope of the interim rule.

The second comment was from a representative of the Idaho Department of Agriculture, who stated that the Animal and Plant Health Inspection Service (APHIS) should not have changed Idaho's brucellosis status from Class Free to Class A because the second affected herd was the result of the movement, from the first affected herd, of a heifer that was subsequently classified as a reactor. According to the commenter, the heifer cannot positively be diagnosed with brucellosis because the heifer tested positive for *Yersinia*, because no *Brucella* organism was cultured from the heifer's tissues, because the cow was vaccinated with RB51, which could cause false positives in brucellosis testing in some cases, and because the heifer was not pregnant and there are no studies proving that a heifer that is not pregnant may pass along the brucellosis bacteria through bodily discharge of wastes.

The regulations define an affected herd as ''Any herd in which any animal has been classified as a brucellosis reactor and which has not been released from quarantine.'' Both herds designated as affected herds in Idaho contained at least one animal that was classified by the State's designated brucellosis epidemiologist as a brucellosis reactor.

The State's designated brucellosis epidemiologist classified the heifer as a brucellosis reactor based on that fact that it originated from an infected herd and based on a panel of positive serological test results, which were repeated in both State and Federal laboratories. Culture confirmation of reactors is not 100 percent successful in all brucellosis cases and therefore is not required under the regulations for classification of infected animals. Although *Yersinia*, another bacteria found in cattle, may cause false positive results on a serologic test for *Brucella*, most of these tests are not able to differentiate *Brucella* from *Yersinia*. Currently there is no conclusive evidence that the RB51 vaccine caused the positive results on the serology tests for *Brucella*.

Although the probability of brucellosis exposure from a virgin heifer is lower than from a pregnant heifer because the primary method of transmission of brucellosis is usually via an infected, aborted fetus, an infected newborn calf, and/or infected tissues and fluids that accompany a birth event, transmission of brucellosis via the urine and feces of infected animals is also possible.

In addition, State status is based on herd infection rates, not on the likelihood of disease transmission. The regulations specifically state that to qualify for Class Free status, a State ''must have a cattle herd infection rate, based on the number of herds found to have brucellosis reactors within the State or area during any 12 consecutive months due to field strain *Brucella abortus* of 0.0 percent or 0 herds per 1,000.'' Idaho has exceeded the criteria of 0.0 percent herd infection rate according to the regulations. Idaho also does not qualify for retaining its Class Free status because more than one herd has been found to be affected with brucellosis during a 2-year period.

Therefore, for the reasons given in the interim rule and in this document, we are adopting the interim rule as a final rule without change. This action also affirms the information contained in the interim rule concerning Executive Order 12866 and the Regulatory Flexibility Act, Executive Orders 12372 and 12988, and the Paperwork Reduction Act.

Further, for this action the Office of Management and Budget has waived its review under Executive Order 12866.

List of Subjects in 9 CFR Part 78

Animal diseases, Bison, Cattle, Hogs, Quarantine, Reporting and recordkeeping requirements, Transportation.

[1] To view the interim rule and the comments we received, go to *http://www.regulations.gov*, click on the ''Advanced Search'' tab, and select ''Docket Search.'' In the Docket ID field, enter APHIS–2006–0001, then click on ''Submit.'' Clicking on the Docket ID link in the search results page will produce a list of all documents in the docket.

PART 78—BRUCELLOSIS

■ Accordingly, we are adopting as a final rule, without change, the interim rule that amended 9 CFR part 78 and that was published at 71 FR 2991–2993 on January 19, 2006.

Done in Washington, DC, this 23rd day of June 2006.

Kevin Shea,

Acting Administrator, Animal and Plant Health Inspection Service.

[FR Doc. 06–5800 Filed 6–28–06; 8:45 am]

BILLING CODE 3410–34–P

DEPARTMENT OF TRANSPORTATION

Federal Aviation Administration

14 CFR Part 39

[Docket No. FAA–2006–23578; Directorate Identifier 2006–CE–01–AD; Amendment 39–14668; AD 2006–13–15]

RIN 2120–AA64

Airworthiness Directives; Mitsubishi Heavy Industries MU–2B Series Airplanes

AGENCY: Federal Aviation Administration (FAA), Department of Transportation (DOT).

ACTION: Final rule.

SUMMARY: We are adopting a new airworthiness directive (AD) for all Mitsubishi Heavy Industries MU–2B series airplanes. This AD requires you to do the following: Remove and visually inspect the wing attach barrel nuts, bolts, and retainers for cracks, corrosion, and fractures; replace any cracked, corroded, or fractured parts; inspect reusable wing attach barrel nuts and bolts for deformation and irregularities in the threads; check the minimum breakaway torque of reused wing attach barrel nuts; replace any deformed or irregular parts; and install new or reusable parts and torque to the correct value. This AD results from a recent safety evaluation that used a data-driven approach to evaluate the design, operation, and maintenance of the MU–2B series airplanes in order to determine their safety and define what steps, if any, are necessary for their safe operation. Part of that evaluation was the identification of unsafe conditions that exist or could develop on the affected type design airplanes. We are issuing this AD to detect and correct cracks, corrosion, fractures, and incorrect torque values in the wing attach barrel nuts, which could result in failure of the wing barrel nuts and/or associated wing attachment hardware. This failure could lead to in-flight separation of the outer wing from the center wing section and result in loss of controlled flight.

DATES: This AD becomes effective on August 11, 2006.

As of August 11, 2006, the Director of the Federal Register approved the incorporation by reference of certain publications listed in the regulation.

ADDRESSES: For service information identified in this AD, contact Mitsubishi Heavy Industries America, Inc., 4951 Airport Parkway, Suite 800, Addison, Texas 95001; telephone: (972) 934–5480; fax: (972) 934–5488, or Turbine Aircraft Services, Inc., 4550 Jimmy Doolittle Drive, Addison, Texas 75001; telephone: (972) 248–3108; facsimile: (972) 248–3321.

To view the AD docket, go to the Docket Management Facility, U.S. Department of Transportation, 400 Seventh Street, SW., Nassif Building, Room PL–401, Washington, DC 20590–0001, or on the Internet at *http://dms.dot.gov.* The docket number is FAA–2006–23578; Directorate Identifier 2006–CE–01–AD.

FOR FURTHER INFORMATION CONTACT: Andrew McAnaul, Aerospace Engineer, ASW–150 (c/o MIDO–43), 10100 Reunion Place, Suite 650, San Antonio, Texas 78216; telephone: (210) 308–3365; facsimile: (210) 308–3370.

SUPPLEMENTARY INFORMATION:

Discussion

On April 18, 2006, we issued a proposal to amend part 39 of the Federal Aviation Regulations (14 CFR part 39) to include an AD that would apply to all Mitsubishi Heavy Industries MU–2B series airplanes. This proposal was published in the **Federal Register** as a supplemental notice of proposed rulemaking (NPRM) on April 24, 2006 (71 FR 20915). We issued the supplemental NPRM to incorporate revised manufacturer service information that adds airplanes to the applicability, revises the serial numbers of the affected airplanes, and updates the manufacturer's contact information. The supplemental NPRM proposed to require you to do the following:

- Remove and visually inspect the wing attach barrel nuts, bolts, and retainers for cracks, corrosion, and fractures;
- Replace any cracked, corroded, or fractured wing attach barrel nuts, bolts, and retainers with new parts;
- Inspect reusable wing attach barrel nuts and bolts for deformation and irregularities in the threads;
- Check the minimum breakaway torque of reused wing attach barrel nuts;
- Replace any deformed or irregular wing attach barrel nuts or bolts with new parts; and
- Install new or reusable parts and torque to the correct value.

Comments

We provided the public the opportunity to participate in developing this AD. We received no comments on the proposal or on the determination of the cost to the public.

Conclusion

We have carefully reviewed the available data and determined that air safety and the public interest require adopting the AD as proposed except for minor editorial corrections. We have determined that these minor corrections:

- are consistent with the intent that was proposed in the NPRM for correcting the unsafe condition; and
- do not add any additional burden upon the public than was already proposed in the NPRM.

Costs of Compliance

We estimate that this AD affects 399 airplanes in the U.S. registry.

We estimate the following costs to do the inspection:

Labor cost	Parts cost	Total cost for each airplane	Total cost on U.S. operators
12 work-hours × $80 an hour = $960	Not applicable	$960	$960 × 399 = $383,040

We estimate the following costs to do any necessary replacements that will be required based on the results of the inspection. We have no way of determining the number of airplanes that may need this replacement:

Labor cost	Parts cost	Total cost for each airplane to replace all 8 wing attach barrel nuts
No additional labor cost. Any necessary replacements will be done at the time of inspection.	$60 for each barrel nut. There are 8 barrel nuts on each airplane. Possible total cost of: $60 × 8 = $480.	$480

The FAA is committed to updating the aviation community of expected costs associated with the MU–2B series airplane safety evaluation conducted in 2005. As a result of that commitment, the accumulating expected costs of all ADs related to the MU–2B series airplane safety evaluation may be found in the Final Report section at the following Web site: *http://www.faa.gov/aircraft/air_cert/design_approvals/small_airplanes/cos/mu2_foia_reading_library/.*

Authority for This Rulemaking

Title 49 of the United States Code specifies the FAA's authority to issue rules on aviation safety. Subtitle I, Section 106 describes the authority of the FAA Administrator. Subtitle VII, Aviation Programs, describes in more detail the scope of the agency's authority.

We are issuing this rulemaking under the authority described in Subtitle VII, Part A, Subpart III, Section 44701, ''General requirements.'' Under that section, Congress charges the FAA with promoting safe flight of civil aircraft in air commerce by prescribing regulations for practices, methods, and procedures the Administrator finds necessary for safety in air commerce. This regulation is within the scope of that authority because it addresses an unsafe condition that is likely to exist or develop on products identified in this AD.

Regulatory Findings

We have determined that this AD will not have federalism implications under Executive Order 13132. This AD will not have a substantial direct effect on the States, on the relationship between the national government and the States, or on the distribution of power and responsibilities among the various levels of government.

For the reasons discussed above, I certify that this AD:

1. Is not a ''significant regulatory action'' under Executive Order 12866;

2. Is not a ''significant rule'' under the DOT Regulatory Policies and Procedures (44 FR 11034, February 26, 1979); and

3. Will not have a significant economic impact, positive or negative, on a substantial number of small entities under the criteria of the Regulatory Flexibility Act.

We prepared a summary of the costs to comply with this AD (and other information as included in the Regulatory Evaluation) and placed it in the AD Docket. You may get a copy of this summary by sending a request to us at the address listed under **ADDRESSES.** Include ''Docket No. FAA–2006–23578; Directorate Identifier 2006–CE–01–AD'' in your request.

List of Subjects in 14 CFR Part 39

Air transportation, Aircraft, Aviation safety, Incorporation by reference, Safety.

Adoption of the Amendment

■ Accordingly, under the authority delegated to me by the Administrator, the Federal Aviation Administration amends part 39 of the Federal Aviation Regulations (14 CFR part 39) as follows:

PART 39—AIRWORTHINESS DIRECTIVES

■ 1. The authority citation for part 39 continues to read as follows:

Authority: 49 U.S.C. 106(g), 40113, 44701.

§ 39.13 [Amended]

■ 2. FAA amends § 39.13 by adding the following new AD:

2006–13–15 Mitsubishi Heavy Industries, Ltd.: Amendment 39–14668; Docket No. FAA–2006–23578; Directorate Identifier 2006–CE–01–AD.

Effective Date

(a) This AD becomes effective on August 11, 2006.

Affected ADs

(b) None.

Applicability

(c) This AD affects the following airplane models and serial numbers that are certificated in any category:

Model	Serial Nos.
MU–2B–10	101 through 120 (Except 102, 114, 115, and 118).
MU–2B–15	114, 115, and 118.
MU–2B–20	102, and 121 through 238.
MU–2B–25	239 through 318 (Except 313), and 313SA.
MU–2B–26	319 through 347 (Except 321), and 349SA.
MU–2B–26A	321SA, 348SA, and 350SA through 394SA (Except 365SA).
MU–2B–30	502 through 547.
MU–2B–35	548 through 654 (Except 652), and 652SA.
MU–2B–36	501, and 655 through 696 (Except 661).
MU–2B–36A	661SA, and 697SA through 730SA (Except 700SA).
MU–2B–40	365SA.
MU–2B–60	700SA.

Unsafe Condition

(d) This AD results from a recent safety evaluation that used a data-driven approach to evaluate the design, operation, and maintenance of the MU–2B series airplanes in order to determine their safety and define what steps, if any, are necessary for their safe operation. Part of that evaluation was to identify unsafe conditions that exist or could develop on the affected type design airplanes. The actions specified in this AD are intended to detect and correct cracks, corrosion, fractures, and incorrect torque values in the wing attach barrel nuts, which could result in failure of the wing attach barrel nuts and/or associated wing attachment hardware. This failure could lead to in-flight separation of the outer wing from the center wing section and result in loss of controlled flight.

Compliance

(e) To address this problem, you must do the following, unless already done:

Actions	Compliance	Procedures
(1) Remove each wing attach barrel nut, bolt, and retainer and do a visual inspection for cracks, corrosion, and fractures.	Within the next 200 hours time-in-service or 12 months after August 11, 2006 (the effective detailed date of this AD), whichever occurs first, unless already done.	Follow Mitsubishi Heavy Industries, Ltd. MU–2 Service Bulletins referenced as JCAB T.C.: No. 241, dated July 14, 2004, and FAA T.C.: No. 103/57–004A, dated March 10, 2006, as applicable.
(2) If any signs of cracks, corrosion, or fractures are found on any wing attach barrel nut during the inspection required in paragraph (e)(1) of this AD, replace that wing attach barrel nut, bolt, and retainer with new parts and install to the correct torque value.	Before further flight after the inspection required in paragraph (e)(1) of this AD, unless already done.	Follow Mitsubishi Heavy Industries, Ltd. MU–2 Service Bulletins referenced as JCAB T.C.: No. 241, dated July 14, 2004, and FAA T.C.: No. 103/57–004A, dated March 10, 2006, as applicable, and the appropriate maintenance manual.
(3) If no signs of cracks, corrosion, or fractures are found during the inspection required in paragraph (e)(1) of this AD, you may reuse the wing attach barrel nuts and bolts if they have been inspected and are free of deformation and irregularities in the threads and meet the minimum breakaway torque requirement. Reinstall inspected parts to the correct torque value. If the wing attach barrel nuts and bolts are not free of deformation and irregularities in the threads or do not meet the minimum breakaway torque requirement, install new parts to the correct torque value.	Before further flight after the inspection required in paragraph (e)(1) of this AD, unless already done.	Follow Mitsubishi Heavy Industries, Ltd. MU–2 Service Bulletins referenced as JCAB T.C.: No. 241, dated July 14, 2004, and FAA T.C.: No. 103/57–004A, dated March 10, 2006, as applicable, and the appropriate maintenance manual.

Alternative Methods of Compliance (AMOCs)

(f) The Manager, Fort Worth Airplane Certification Office, FAA, ATTN: Andrew McAnaul, Aerospace Engineer, ASW–150 (c/o MIDO–43), 10100 Reunion Place, Suite 650, San Antonio, Texas 78216; telephone: (210) 308–3365; facsimile: (210) 308–3370, has the authority to approve alternative methods of compliance for this AD, if requested using the procedures found in 14 CFR 39.19.

Related Information

(g) Mitsubishi Heavy Industries, Ltd. MU–2 Service Bulletins JCAB T.C.: No. 241, dated July 14, 2004, and FAA T.C.: No. 103/57–004A, dated March 10, 2006, pertain to the subject of this AD.

Material Incorporated by Reference

(h) You must do the actions required by this AD following Mitsubishi Heavy Industries, Ltd. MU–2 Service Bulletins referenced as JCAB T.C.: No. 241, dated July 14, 2004, and FAA T.C.: No. 103/57–004A, pages 1 and 4 dated March 10, 2006, pages 2, 3, 5, 6, and 7 dated August 2, 2004. The Director of the Federal Register approved the incorporation by reference of this service bulletin in accordance with 5 U.S.C. 552(a) and 1 CFR part 51. To get a copy of this service information, contact Mitsubishi Heavy Industries America, Inc., 4951 Airport Parkway, Suite 800, Addison, Texas 95001; telephone: (972) 934–5480; fax: (972) 934–5488, or Turbine Aircraft Services, Inc., 4550 Jimmy Doolittle Drive, Addison, Texas 75001; telephone: (972) 248–3108; facsimile: (972) 248–3321. To review copies of this service information, go to the National Archives and Records Administration (NARA). For information on the availability of this material at NARA, go to: *http://www.archives.gov/federal_register/code_of_federal_regulations/ibr_locations.html* or call (202) 741–6030. To view the AD docket, go to the Docket Management Facility; U.S. Department of Transportation, 400 Seventh Street, SW., Nassif Building, Room PL–401, Washington, DC 20590–001 or on the Internet at *http://dms.dot.gov*. The docket number is FAA–2006–23578; Directorate Identifier 2006–CE–01–AD.

Issued in Kansas City, Missouri, on June 19, 2006.

James E. Jackson,

Acting Manager, Small Airplane Directorate, Aircraft Certification Service.

[FR Doc. 06–5653 Filed 6–28–06; 8:45 am]

BILLING CODE 4910–13–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

21 CFR Parts 1 and 11

[Docket No. 2005D–0356]

Guidance for Industry: Questions and Answers Regarding the Final Rule on Establishment and Maintenance of Records (Edition 3); Availability

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice of availability of guidance.

SUMMARY: The Food and Drug Administration (FDA) is announcing the availability of a guidance entitled ''Questions and Answers Regarding Establishment and Maintenance of Records (Edition 3).'' The guidance responds to various questions raised about section 306 of the Public Health Security and Bioterrorism Preparedness and Response Act of 2002 (the Bioterrorism Act) and the agency's implementing regulation, which requires the establishment and maintenance of records by persons who manufacture, process, pack, transport, distribute, receive, hold, or import food in the United States. Such records are to allow for the identification of the immediate previous sources and the immediate subsequent recipients of food. Persons covered by the regulation who employ 500 or more full-time equivalent employees (FTEs) had to be in compliance by December 9, 2005, and those who employ 11-499 FTEs had to be in compliance by June 9, 2006. Persons who employ 10 or fewer FTEs have until December 11, 2006 to be in compliance. ''Person'' includes an individual, partnership, corporation, and association.

DATES: Submit written or electronic comments on the agency guidance at any time.

ADDRESSES: You may submit comments, identified by Docket No. 2005D–0356, by any of the following methods:

Electronic Submissions

Submit electronic comments in the following ways:

- Federal eRulemaking Portal: *http://www.regulations.gov*. Follow the instructions for submitting comments.
- Agency Web site: *http://www.fda.gov/dockets/ecomments*. Follow the instructions for submitting comments on the agency Web site.

Written Submissions

Submit written submissions in the following ways:

- FAX: 301–827–6870.
- Mail/Hand delivery/Courier [For paper, disk, or CD–ROM submissions]: Division of Dockets Management (HFA–305), Food and Drug Administration, 5630 Fishers Lane, rm. 1061, Rockville, MD 20852.

To ensure more timely processing of comments, FDA is no longer accepting comments submitted to the agency by e-mail. FDA encourages you to continue to submit electronic comments by using the Federal eRulemaking Portal or the agency Web site, as described in the *Electronic Submissions* portion of this paragraph.

Instructions: All submissions received must include the agency name and Docket No(s). and Regulatory Information Number (RIN) (if a RIN number has been assigned) for this rulemaking. All comments received may be posted without change to *http://www.fda.gov/ohrms/dockets/default.htm*, including any personal information provided. For additional information on submitting comments, see the ''Comments'' heading of the **SUPPLEMENTARY INFORMATION** section of this document.

Docket: For access to the docket to read background documents or comments received, go to *http://www.fda.gov/ohrms/docket/default.htm* and insert the docket number(s), found in brackets in the heading of this document, into the ''Search'' box and follow the prompts and/or go to the Division of Dockets Management, 5630 Fishers Lane, rm. 1061, Rockville, MD 20852.

FOR FURTHER INFORMATION CONTACT: Center for Food Safety and Applied Nutrition at 1–888–SAFEFOOD, FAX: 1–877–366–3322, or by e-mail: *industry@fda.gov.*

SUPPLEMENTARY INFORMATION:

I. Background

In the **Federal Register** of December 9, 2004 (69 FR 71562), FDA issued a final rule to implement section 306 of the Bioterrorism Act. The regulation requires the establishment and maintenance of records by persons who manufacture, process, pack, transport, distribute, receive, hold, or import food in the United States. Such records are to allow for the identification of the immediate previous sources and the immediate subsequent recipients of food. Persons subject to the regulation who employ 500 or more FTEs had to be in compliance by December 9, 2005, and those who employ 11-499 FTEs had to be in compliance by June 9, 2006. Persons who employ 10 or fewer FTEs have until December 11, 2006 to be in compliance. ''Person'' includes an individual, partnership, corporation, and association.

On September 12, 2005, FDA issued the first edition of a guidance entitled ''Questions and Answers Regarding Establishment and Maintenance of Records.'' On November 22, 2005, FDA issued a second edition of that guidance. This document is the third edition of that guidance entitled ''Questions and Answers Regarding Establishment and Maintenance of Records (Edition 3)'' and responds to questions regarding persons covered by the regulation; persons excluded by the regulation, including additional guidance on the farm and restaurant exclusions; and what information is required in the records established and maintained by warehouse distribution facilities. It is intended to help the industry better understand and comply with the regulation in 21 CFR part 1, subpart J. FDA is issuing this guidance as a Level 1 guidance. The guidance represents the agency's current thinking on the topic. It does not create or confer any rights for or on any person and does not operate to bind FDA or the public.

Consistent with FDA's good guidance practices regulation § 10.115(g)(2) (21 CFR 10.115), the agency will accept comments, but it is implementing the guidance document immediately, in accordance with § 10.115(g)(2), because the agency has determined that prior public participation is not feasible or appropriate. As noted, persons who employ 500 or more FTEs had to begin to establish and maintain records identifying the immediate previous sources and immediate subsequent recipients of food by December 9, 2005, and those who employ 11-499 FTEs had to be in compliance by June 9, 2006. Persons who employ 10 or fewer FTEs have until December 11, 2006 to be in compliance. Clarifying the provisions of the final rule will facilitate prompt compliance with these requirements and complete the rule's implementation.

FDA continues to receive large numbers of questions regarding the records final rule, and is responding to these questions under § 10.115 as promptly as possible, using a question-and-answer format. The agency believes that it is reasonable to maintain all responses to questions concerning establishment and maintenance of records in a single document that is periodically updated as the agency receives and responds to additional questions. The following four indicators will be employed to help users of this guidance identify revisions: (1) The guidance will be identified as a revision of a previously issued document, (2) the revision date of the guidance will appear on its cover, (3) the edition number of the guidance will be included in its title, and (4) questions and answers that have been added to the original guidance will be identified as such in the body of the guidance.

II. Comments

Interested persons may submit to the Division of Dockets Management (see **ADDRESSES**) written or electronic comments regarding the guidance at any time. Submit a single copy of electronic comments or two paper copies of any mailed comments, except that individuals may submit one paper copy. Comments are to be identified with the docket number found in brackets in the heading of this document. Received comments and the guidance may be seen in the Division of Dockets Management between 9 a.m. and 4 p.m., Monday through Friday.

III. Electronic Access

Persons with access to the Internet may obtain the guidance at *http://www.cfsan.fda.gov/guidance.html* or *http://www.cfsan.fda.gov/~dms/recguid3.html*

Dated: June 22, 2006.

Jeffrey Shuren,

Assistant Commissioner for Policy.

[FR Doc. E6–10239 Filed 6–28–06; 8:45 am]

BILLING CODE 4160–01–S

DEPARTMENT OF THE TREASURY

Internal Revenue Service

26 CFR Part 1

[TD 9262]

RIN 1545–BF57

Computer Software Under Section 199(c)(5)(B); Correction

AGENCY: Internal Revenue Service (IRS), Treasury.

ACTION: Correction to temporary regulations.

SUMMARY: This document contains a correction to temporary regulations (TD 9262) that were published in the **Federal Register** on Thursday, June 1, 2006 (71 FR 31074) concerning the application of section 199 of the Internal Revenue Code, which provides a deduction for income attributable to domestic production activities, to certain transactions involving computer software.

DATES: These corrections are effective June 1, 2006.

FOR FURTHER INFORMATION CONTACT: Paul Handleman or Lauren Ross Taylor, (202) 622–3040 (not a toll-free number).

SUPPLEMENTARY INFORMATION:

Background

The correction notice that is the subject of this document is under section 199 of the Internal Revenue Code.

Need for Correction

As published, the correction notice (TD 9262) contains errors that may prove to be misleading and are in need of clarification.

Correction of Publication

Accordingly, the publication of the temporary regulations (TD 9262), which was the subject of FR Doc. 06–4828, is corrected as follows:

1. On page 31075, column 1, in the preamble, under the paragraph heading *''Qualified Production Activities Income,''* first paragraph of the column, line 3, the language ''mean: (A) Tangible personal property;'' is corrected to read ''mean: (A) tangible personal property;''.

2. On page 31075, column 1, in the preamble, under the paragraph heading ''Summary of Comments'', last paragraph of the column, line 16, the language ''include: (1) Whether an agreement'' is corrected to read ''include: (1) whether an agreement''.

3. On page 31075, column 3, in the preamble, under the paragraph heading ''Explanation of Provisions'', first paragraph of the column, line 11, the language ''applies if a taxpayer that derives gross'' is corrected to read ''applies if a taxpayer derives gross''.

4. On page 31076, column 1, in the preamble, under the paragraph heading ''Effective Date'', first paragraph of the column, line 4, the language ''regulations expires on or before May 25,'' is corrected to read ''regulations expires on or before May 22,''.

5. On page 31077, column 2, in the signature block, the language ''Mark E. Mathews,'' is corrected to read ''Mark E. Matthews,''.

Guy R. Traynor,

Chief, Publications and Regulations Branch, Legal Processing Division, Associate Chief Counsel (Procedure and Administration).

[FR Doc. E6–10248 Filed 6–28–06; 8:45 am]

BILLING CODE 4830–01–P

DEPARTMENT OF LABOR

Occupational Safety and Health Administration

29 CFR Part 1952

Occupational Safety and Health of Contractor Employees at Certain Energy Department Sites; Jurisdiction and Enforcement Responsibilities; Clarification Regarding State Plans—Arizona, California, Iowa, Kentucky, Minnesota, Nevada, New Mexico, North Carolina, Oregon, South Carolina, Utah, Virginia, Washington, and Wyoming

AGENCY: Occupational Safety and Health Administration (OSHA), U.S. Department of Labor.

ACTION: Final rule.

SUMMARY: This notice provides further clarification as to the jurisdiction and enforcement responsibilities of the Occupational Safety and Health Administration and 14 of its approved State Plans at various Department of Energy (DOE) sites which are not subject to the Atomic Energy Act (AEA). OSHA's regulations in 29 CFR 1952 are amended to reflect this jurisdiction, as appropriate.

DATES: Effective Date: June 29, 2006.

FOR FURTHER INFORMATION CONTACT: For general information and press inquiries, contact Kevin Ropp, Director, Office of Communications, Room N–3647, OSHA, U.S. Department of Labor, 200 Constitution Avenue, NW., Washington, DC 20210; telephone (202) 693–1999. For technical inquiries, contact Barbara Bryant, Director, Office of State Programs, Room N–3700, OSHA, U.S. Department of Labor, 200 Constitution Avenue, NW., Washington, DC 20210; telephone (202) 693–2244. An electronic copy of this **Federal Register** notice is available on OSHA's *website at www.osha.gov.*

SUPPLEMENTARY INFORMATION:

Background

The U.S. Department of Labor (DOL) and the U.S. Department of Energy (DOE) previously clarified their regulatory authority over the occupational safety and health of private-sector contractor employees at a number of DOE government-owned or leased facilities that are not subject to the Atomic Energy Act (AEA). (65 FR 41492, July 5, 2000) Some of these facilities are either government-owned and government-operated (GOGO) or government-owned and contractor-operated (GOCO).

The Atomic Energy Act provides statutory authority to DOE to regulate occupational safety and health matters relating to private sector employees at facilities subject to the AEA. Section 4(b)(1) of the Occupational Safety and Health Act of 1970, 29 U.S.C. (the Act), Section 653(b)(1), precludes OSHA coverage of working conditions over which other federal agencies have exercised statutory authority to prescribe or enforce standards for occupational safety or health. A 1992 Interagency Memorandum of Understanding provides that the Occupational Safety and Health Act shall not apply to government owned-contractor operated (GOCO) sites or other facilities with private sector employees for which DOE, pursuant to the AEA, has exercised its authority to regulate occupational safety and health.

By letter of June 18, 1999, and further clarified by letter on March 31, 2000, DOE provided OSHA with a list of DOE sites that were not covered by the AEA and requested OSHA's concurrence with DOE's views that the facilities and operations in question were subject to OSHA's jurisdiction. These sites are primarily involved in fossil fuel energy research and power marketing administration. OSHA responded by letter on July 13, 1999, agreeing with DOE that OSHA has jurisdiction over the working conditions of private sector employers and employees at such facilities.

On July 5, 2000, OSHA published a notice in the **Federal Register** (65 FR 41492), listing these sites and stating that private sector employers and employees at these DOE facilities are subject to all standards, rules and requirements issued under the Occupational Safety and Health Act. The sites are:

Department of Energy (DOE) Non-Atomic Energy Act (AEA) Sites and Facilities

Western Area Power Administration Headquarters, P.O. Box 3402, Golden, CO 80401–0098, Covers all or part of the following States: AZ*, CA*, CO, IA*, KS, MN*, MT, NE, ND, NM*, NV*, SD, TX, UT*, WY*

Southwestern Power Administration, Headquarters, P.O. Box 1619, Tulsa, OK 74101, Covers all or part of the following States: AR, KS, LA, MO, OK, TX

Southeastern Power Administration, Headquarters, 2 South Public Square, Elberton, GA 30635, Covers all or part of the following States: AL, FL, GA, IL, KY*, MS, NC*, SC*, VA*, WV

Bonneville Power Administration, 905 NE 11th Ave., P.O. Box 3621,

Portland, OR 97208–3621, Covers all or part of the following States: CA*, ID, MT, NV*, OR*, UT*, WA*, WY*
National Energy Technology Laboratory (NETL), 3610 Collins Ferry Road, P.O. Box 880, Morgantown, WV 26507–0880
National Energy Technology Laboratory (NETL), 626 Cochrans Mill Road, Pittsburgh, PA 15236–0940
Strategic Petroleum Reserves (SPR), Project Office, 900 Commerce Road East, New Orleans, LA 70123
National Petroleum Technology Office, Williams Center Tower 1, 1 West Third St., Suite 1400, Tulsa, OK 74103
Albany Research Center, 1450 Queen Ave., SW, Albany, OR* 97321–2198
Naval Petroleum & Oil Shale Reserves in CO, UT*, & WY*, 907 N. Poplar St., Suite 150, Casper, WY 82601
Naval Petroleum Reserves in California, 28590 Highway 119, P.O. Box 11, Tupman, CA* 93276

OSHA noted that a number of the non-AEA facilities are located in states which operate OSHA-approved state plans under Section 18 of the Occupational Safety and Health Act of 1970, 29 U.S.C 667 (noted with asterisk above), and which have primary authority for private sector occupational safety and health coverage in their states. However, pending a final determination, the state plan non-AEA sites were deemed ''issues not covered by the state plan'' and thus subject to federal enforcement jurisdiction. Federal OSHA would exercise enforcement jurisdiction over private sector employers and employees at the non-AEA sites located in state plan states, until it was determined whether a state would exercise jurisdiction. These determinations have now been made and this document provides notice that the affected states will assume occupational safety and health regulatory responsibility for all except five of the non-AEA sites in their states.

The following State Plans intend to exercise jurisdiction over private contractors performing work at these non-AEA facilities and operations located in their states, except that federal employees and employees of private sector companies responsible for operating an entire facility under contract to DOE (contractor-operated facility) remain subject to federal OSHA jurisdiction. (Under the provisions of the Act and various interpretations by the courts, states with OSHA-approved state plans are precluded from exercising jurisdiction over federal employees or over federal instrumentalities such as government owned-contractor operated (GOCO) facilities.) To the extent that a state should be unable to exercise jurisdiction over other private contractors at these sites, for whatever reason, OSHA will assume responsibility for coverage.

Arizona—Western Area Power Administration [1] (Phoenix, AZ, *et al*)
California—Western Area Power Administration, Bonneville Power Administration, Naval Petroleum Reserve (Tupman, CA)
Iowa—Western Area Power Administration
Kentucky—Southeastern Power Administration
Minnesota—Western Area Power Administration
Nevada—Western Area Power Administration, Bonneville Power Administration
New Mexico—Western Area Power Administration (except Elephant Butte)
North Carolina—Southeastern Power Administration
Oregon—Bonneville Power Administration (Portland, OR, *et al*)
South Carolina—Southeastern Power Administration
Utah—Western Area Power Administration, Bonneville Power Administration, activities at the site of the Naval Petroleum and Oil Shale Reserve in Utah where divested by the Department of Energy
Virginia—Southeastern Power Administration (except the Kerr-Philpott System)
Washington—Bonneville Power Administration (Vancouver, WA, et al) (except in controlled areas of the Hanford Reservation)
Wyoming—Western Area Power Administration, Bonneville Power Administration

The following State Plans do not intend to exercise jurisdiction over private sector workers at the following non-AEA sites in their states. All employees at these DOE sites, both federal and private sector, remain subject to federal OSHA jurisdiction, so long as they remain facilities operated by the Department of Energy. If a site is divested by DOE, or otherwise transferred, private sector employees are subject to State Plan jurisdiction absent a further determination.

New Mexico—Western Area Power Administration site at Elephant Butte
Oregon—Albany Research Center in Albany, OR
Utah—Naval Petroleum and Oil Shale Reserve (if divested by DOE, coverage reverts to the state)
Virginia—Southeastern Power Administration's Kerr-Philpott System
Wyoming—Naval Petroleum and Oil Shale Reserve

Decision

29 CFR Part 1953 sets forth the procedures by which the Assistant Secretary will review changes to State Plans approved in accordance with Section 18(c) of the Act and Part 1902. Upon review of the 14 State Plan decisions to assert or decline jurisdiction, and in accordance with these procedures, OSHA hereby approves these actions and amends the subparts in 29 CFR Part 1952 for New Mexico (Western Area Power Administration at Elephant Butte), Oregon (Albany Research Center), Utah (Naval Petroleum and Oil Shale Reserve), Virginia (Southeastern Power Administration's Kerr-Philpott System) and Wyoming (Naval Petroleum and Oil Shale Reserve) to reflect the formal exclusion of these entities from the State Plan and continuation of federal jurisdiction over private sector contractor employees at these sites so long as they remain DOE sites not subject to the Atomic Energy Act. For all other listed facilities in states with OSHA-approved State Plans, this document provides notification to affected private sector employers and employees of these non-AEA sites that they will be subject to State Plan occupational safety and health jurisdiction like most other private sector employers in those States. Those States assuming jurisdiction over these private sector employers and employees will make available to them detailed information on the State's standards, regulations, procedures and practices, including differences from the Federal.

Public Participation

Under Section 29 CFR 1953.2(c), the Assistant Secretary may prescribe alternative procedures to expedite the review process or for other good cause which may be consistent with applicable laws. As these changes in jurisdiction generally impose no new responsibilities or requirements on employers or employees, no opportunity for public comment is required.

[1] The Power Marketing Administrations operate in multiple states, with headquarters in Lakewood, Colorado (Western Area Power Administration), Portland, Oregon (Bonneville Power Administration), and Elberton, Georgia (Southeastern Power Administration). Power authority site locations in these state plan states are noted where available; in some states, Power Marketing Administration activity may be limited to power lines traversing the state with no site locations—but there may still be employee exposure to hazards during construction and maintenance operations.

Regulatory Flexibility Act

OSHA certifies pursuant to the Regulatory Flexibility Act of 1980 (5 U.S.C. 601 *et seq.*) that this action will not have a significant economic impact on a substantial number of small entities. The change from federal to state jurisdiction for private contractors at these DOE non-AEA sites would not place small contractors at these sites under any significant new or different requirements. No additional burden will be placed upon the state governments beyond the responsibilities already assumed as part of the approved state plans.

Federalism

Executive Order 13132, ''Federalism'' (64 FR 43255, Aug. 10, 1999), emphasizes consultation between federal agencies and the states and establishes specific review procedures the federal government must follow as it carries out policies which affect state or local governments. OSHA has included in the Supplementary Information section of today's notice a general explanation of the relationship between federal OSHA and the state plan states under the Occupational Safety and Health Act. Although it appears that the specific consultation procedures provided under Section 6 of Executive Order 13132 are not mandatory for state plan jurisdiction changes because they neither impose a burden upon the state nor involve preemption of any state law, OSHA has nonetheless consulted extensively with these states on their individual decisions on these issues. OSHA has reviewed the decisions approved today and believes they are consistent with the principles and criteria set forth in the Executive Order.

This document was prepared under the direction of Edwin G. Foulke, Jr., Assistant Secretary of Labor for Occupational Safety and Health. It is issued under Section 18 of the Occupational Safety and Health Act of 1970, 84 Stat. 1608 (29 U.S.C. 667); 29 CFR Part 1902; and Secretary of Labor's Order No. 5–2002 (67 FR 65008, Oct. 22, 2002).

List of Subjects in 29 CFR Part 1952

Intergovernmental relations, Law enforcement, Occupational safety and health, Occupational Safety and Health Administration.

Signed at Washington, DC, this 30th day of May, 2006.

Edwin G. Foulke, Jr.,

Assistant Secretary.

■ Part 1952 of 29 CFR is hereby amended as follows:

PART 1952—[AMENDED]

■ 1. The authority section for part 1952 continues to read as follows:

Authority: Section 18 of the OSH Act (29 U.S.C. 667), 29 CFR part 1902, and Secretary of Labor's Order No. 5–2002 (67 FR 65008).

Subpart D—Oregon

■ 2. Amend § 1952.104 by revising the second sentence of paragraph (b) to read as follows:

§ 1952.104 Final approval determination.

* * * * *

(b) * * * The plan does not cover private sector establishments on Indian reservations and tribal trust lands, including tribal and Indian-owned enterprises; employment at Crater Lake National Park; employment at the U.S. Department of Energy's Albany Research Center (ARC); Federal agencies; the U.S. Postal Service and its contractors; contractors on U.S. military reservations, except those working on U.S. Army Corps of Engineers dam construction projects; and private sector maritime employment on or adjacent to navigable waters, including shipyard operations and marine terminals.

* * * * *

■ 3. Amend § 1952.105 by redesignating paragraph (b)(1)(v) as (b)(1)(vi) and adding a new paragraph (b)(1)(v), to read as follows:

§ 1952.105 Level of Federal enforcement.

* * * * *

(b)(1) * * *

(v) Enforcement of occupational safety and health standards with regard to employment at the U.S. Department of Energy's Albany Research Center (ARC);

* * * * *

Subpart E—Utah

■ 4. Amend § 1952.114 by revising the second sentence of paragraph (b) to read as follows:

§ 1952.114 Final approval determination.

* * * * *

(b) * * * The plan does not cover private sector maritime employment; employment on Hill Air Force Base; employment at the U.S. Department of Energy's Naval Petroleum and Oil Shale Reserve, to the extent that it remains a U.S. DOE facility; Federal government employers and employees; the U.S. Postal Service (USPS), including USPS employees, and contract employees and contractor-operated facilities engaged in USPS mail operations; the enforcement of the field sanitation standard, 29 CFR 1928.110, and the enforcement of the temporary labor camps standard, 29 CFR 1910.142, with respect to any agricultural establishment where employees are engaged in ''agricultural employment'' within the meaning of the Migrant and Seasonal Agricultural Worker Protection Act, 29 U.S.C. 1802(3), regardless of the number of employees, including employees engaged in hand packing of produce into containers, whether done on the ground, on a moving machine, or in a temporary packing shed, except that Utah retains enforcement responsibility over agricultural temporary labor camps for employees engaged in egg, poultry, or red meat production, or the post-harvest processing of agricultural or horticultural commodities.

* * * * *

■ 5. Amend § 1952.115 by revising the fifth sentence of paragraph (b) to read as follows:

§ 1952.115 Level of Federal enforcement.

* * * * *

(b) * * * Federal jurisdiction is also retained with regard to: all employment on the Hill Air Force Base; all employment at the U.S. Department of Energy's Naval Petroleum and Oil Shale Reserve, to the extent that it remains a U.S. DOE facility; Federal government employers and employees; and the U.S. Postal Service (USPS), including USPS employees, and contract employees and contractor-operated facilities engaged in USPS mail operations. * * *

* * * * *

Subpart BB—Wyoming

■ 6. Amend § 1952.344 by revising the second sentence of paragraph (b) to read as follows:

§ 1952.344 Final approval determination.

* * * * *

(b) * * * The plan does not cover private sector maritime employment; employment on the Warren Air Force Base; employment at the U.S. Department of Energy's Naval Petroleum and Oil Shale Reserve; Federal government employers and employees; the U.S. Postal Service (USPS), including USPS employees, and contract employees and contractor-operated facilities engaged in USPS mail operations; the enforcement of the field sanitation standard, 29 CFR 1928.110, and the enforcement of the temporary labor camps standard, 29 CFR 1910.142, with respect to any agricultural establishment where employees are engaged in ''agricultural employment'' within the meaning of the Migrant and Seasonal Agricultural Worker Protection Act, 29 U.S.C. 1802(3), regardless of the number of employees, including

employees engaged in hand packing of produce into containers, whether done on the ground, on a moving machine, or in a temporary packing shed, except that Wyoming retains enforcement responsibility over agricultural temporary labor camps for employees engaged in egg, poultry, or red meat production, or the post-harvest processing of agricultural or horticultural commodities.

* * * * *

■ 7. Amend § 1952.345 by revising the last sentence of paragraph (b)(1) to read as follows:

§ 1952.345 Level of Federal enforcement.

* * * * *

(b)(1) * * * Federal jurisdiction is also retained for employment at Warren Air Force Base; employment at the U.S. Department of Energy's Naval Petroleum and Oil Shale Reserve; Federal government employers and employees; and the U.S. Postal Service (USPS), including USPS employees, and contract employees and contractor-operated facilities engaged in USPS mail operations.

* * * * *

Subpart DD—New Mexico

■ 8. Amend § 1952.365 by revising paragraph (a)(9) to read as follows:

§ 1952.365 Level of Federal enforcement.

* * * * *

(a) * * *

(9) Enforcement of occupational safety and health standards with regard to employment at the U.S. Department of Energy's Western Area Power Administration site at Elephant Butte; Federal government employers and employees; and the U.S. Postal Service (USPS), including USPS employees and contract employees and contractor-operated facilities engaged in USPS mail operations; and

* * * * *

Subpart EE—Virginia

■ 9. Amend § 1952.374 by revising the second sentence of paragraph (b) to read as follows:

§ 1952.374 Final approval determination.

* * * * *

(b) * * * The plan does not cover private sector maritime employment; worksites located within Federal military facilities as well as on other Federal enclaves where civil jurisdiction has been ceded by the State to the Federal government; employment at the U.S. Department of Energy's Southeastern Power Administration Kerr-Philpott System; Federal government employers and employees; and the U.S. Postal Service (USPS), including USPS employees, and contract employees and contractor-operated facilities engaged in USPS mail operations.

* * * * *

■ 10. Amend § 1952.375 by revising the last sentence of paragraph (b)(1) to read as follows:

§ 1952.375 Level of Federal enforcement.

* * * * *

(b)(1) * * * Federal jurisdiction is also retained with respect to employment at the U.S. Department of Energy's Southeastern Power Administration Kerr-Philpott System; Federal government employers and employees; and the U.S. Postal Service (USPS), including USPS employees, and contract employees and contractor-operated facilities engaged in USPS mail operations.

* * * * *

[FR Doc. 06–5789 Filed 6–28–06; 8:45 am]

BILLING CODE 4510–26–P

DEPARTMENT OF HOMELAND SECURITY

Coast Guard

33 CFR Part 100

[CGD05–06–025]

RIN 1625–AA08

Special Local Regulations for Marine Events; Mill Creek, Fort Monroe, Hampton, VA

AGENCY: Coast Guard, DHS.

ACTION: Temporary final rule.

SUMMARY: The Coast Guard is establishing temporary special local regulations for the ''Hampton Cup Regatta,'' a power boat race to be held on the waters of Mill Creek, near Fort Monroe, Hampton, Virginia. These special local regulations are necessary to provide for the safety of life on navigable waters during the event. This action is intended to restrict vessel traffic in portions of Mill Creek adjacent to Fort Monroe during the power boat race.

DATES: This rule is effective from 7:30 a.m. on August 18, 2006 to 6:30 p.m. on August 20, 2006.

ADDRESSES: Documents indicated in this preamble as being available in the docket, are part of docket CGD05–06–025 and are available for inspection or copying at Commander (dpi), Fifth Coast Guard District, 431 Crawford Street, Portsmouth, Virginia 23704–5004, between 9 a.m. and 2 p.m., Monday through Friday, except Federal holidays.

FOR FURTHER INFORMATION CONTACT: Dennis Sens, Project Manager, Inspections and Investigations Branch, at (757) 398–6204.

SUPPLEMENTARY INFORMATION

Regulatory Information

On April 17, 2006, we published a notice of proposed rulemaking (NPRM) entitled Special Local Regulations for Marine Events; Mill Creek, Fort Monroe, Hampton, VA in the **Federal Register** (71 FR 19672). We received no letters commenting on the proposed rule. No public meeting was requested, and none was held.

Background and Purpose

On August 18, 19 and 20, 2006, the Virginia Boat Racing Association will sponsor the ''Hampton Cup Regatta,'' on the waters of Mill Creek adjacent to Fort Monroe, Hampton, Virginia. The event will consist of approximately 100 inboard hydroplanes racing in heats counter-clockwise around an oval racecourse. A fleet of spectator vessels is anticipated to gather nearby to view the competition. Due to the need for vessel control during the event, vessel traffic will be temporarily restricted to provide for the safety of participants, spectators and transiting vessels.

Discussion of Comments and Changes

The Coast Guard did not receive comments in response to the notice of proposed rulemaking (NPRM) published in the **Federal Register**. Accordingly, the Coast Guard is establishing temporary special local regulations on specified waters of Mill Creek, Fort Monroe, Hampton, Virginia.

Regulatory Evaluation

This rule is not a ''significant regulatory action'' under section 3(f) of Executive Order 12866 and does not require an assessment of potential costs and benefits under section 6(a)(3) of that Order. The Office of Management and Budget has not reviewed it under that Order. It is not ''significant'' under the regulatory policies and procedures of the Department of Homeland Security (DHS).

We expect the economic impact of this temporary rule to be so minimal that a full Regulatory Evaluation under the regulatory policies and procedures of DHS is unnecessary.

Although this regulation prevents traffic from transiting a portion of Mill Creek, near Fort Monroe, Hampton,

Virginia during the event, the effect of this regulation will not be significant due to the limited duration that the regulated area will be in effect and the extensive advance notifications that will be made to the maritime community via marine information broadcasts, local commercial radio stations and area newspapers so mariners can adjust their plans accordingly.

Small Entities

Under the Regulatory Flexibility Act (5 U.S.C. 601–612), we considered whether this rule would have a significant economic impact on a substantial number of small entities. The term ''small entities'' comprises small businesses, not-for-profit organizations that are independently owned and operated and are not dominant in their fields, and governmental jurisdictions with populations of less than 50,000.

The Coast Guard certifies under 5 U.S.C. 605(b) that this rule will not have a significant economic impact on a substantial number of small entities. This rule will affect the following entities, some of which may be small entities: the owners or operators of vessels intending to transit this section of Mill Creek, Hampton, Virginia during the event.

This rule will not have a significant economic impact on a substantial number of small entities for the following reasons. This rule will be enforced for only a short period, from 7:30 a.m. to 6:30 p.m. on August 18, 19 and 20, 2006. Affected waterway users may pass safely around the regulated area with approval from the patrol commander. Before the enforcement period, we will issue maritime advisories so mariners can adjust their plans accordingly.

Assistance for Small Entities

Under section 213(a) of the Small Business Regulatory Enforcement Fairness Act of 1996 (Pub. L. 104–121), we want to assist small entities in understanding this rule so that they can better evaluate its effects on them and participate in the rulemaking process.

Small businesses may send comments on the actions of Federal employees who enforce, or otherwise determine compliance with, Federal regulations to the Small Business and Agriculture Regulatory Enforcement Ombudsman and the Regional Small Business Regulatory Fairness Boards. The Ombudsman evaluates these actions annually and rates each agency's responsiveness to small business. If you wish to comment on actions by employees of the Coast Guard, call 1–888–REG–FAIR (1–888–734–3247).

Collection of Information

This rule would call for no new collection of information under the Paperwork Reduction Act of 1995 (44 U.S.C. 3501–3520).

Federalism

A rule has implications for federalism under Executive Order 13132, Federalism, if it has a substantial direct effect on State or local governments and would either preempt State law or impose a substantial direct cost of compliance on them. We have analyzed this rule under that Order and have determined that it does not have implications for federalism.

Unfunded Mandates Reform Act

The Unfunded Mandates Reform Act of 1995 (2 U.S.C. 1531–1538) requires Federal agencies to assess the effects of their discretionary regulatory actions. In particular, the Act addresses actions that may result in the expenditure by a State, local, or tribal government, in the aggregate, or by the private sector of $100,000,000 or more in any one year. Though this rule will not result in such expenditure, we do discuss the effects of this rule elsewhere in this preamble.

Taking of Private Property

This rule will not effect a taking of private property or otherwise have taking implications under Executive Order 12630, Governmental Actions and Interference with Constitutionally Protected Property Rights.

Civil Justice Reform

This rule meets applicable standards in sections 3(a) and 3(b)(2) of Executive Order 12988, Civil Justice Reform, to minimize litigation, eliminate ambiguity, and reduce burden.

Protection of Children

We have analyzed this rule under Executive Order 13045, Protection of Children from Environmental Health Risks and Safety Risks. This rule is not an economically significant rule and does not concern an environmental risk to health or risk to safety that may disproportionately affect children.

Indian Tribal Governments

This rule does not have tribal implications under Executive Order 13175, Consultation and Coordination with Indian Tribal Governments, because it would not have a substantial and direct effect on one or more Indian tribes, on the relationship between the Federal Government and Indian tribes, or on the distribution of power and responsibilities between the Federal Government and Indian tribes.

Energy Effects

We have analyzed this rule under Executive Order 13211, Actions Concerning Regulations That Significantly Affect Energy Supply, Distribution, or Use. We have determined that it is not a ''significant energy action'' under that order because it is not a ''significant regulatory action'' under Executive Order 12866 and is not likely to have a significant adverse effect on the supply, distribution, or use of energy. The Administrator of the Office of Information and Regulatory Affairs has not designated it as a significant energy action. Therefore, it does not require a Statement of Energy Effects under Executive Order 13211.

Technical Standards

The National Technology Transfer and Advancement Act (NTTAA) (15 U.S.C. 272 note) directs agencies to use voluntary consensus standards in their regulatory activities unless the agency provides Congress, through the Office of Management and Budget, with an explanation of why using these standards would be inconsistent with applicable law or otherwise impractical. Voluntary consensus standards are technical standards (*e.g.*, specifications of materials, performance, design, or operation; test methods; sampling procedures; and related management systems practices) that are developed or adopted by voluntary consensus standards bodies.

This rule does not use technical standards. Therefore, we did not consider the use of voluntary consensus standards.

Environment

We have analyzed this rule under Commandant Instruction M16475.1D, which guides the Coast Guard in complying with the National Environmental Policy Act of 1969 (NEPA) (42 U.S.C. 4321–4370f), and have concluded that there are no factors in this case that would limit the use of a categorical exclusion under section 2.B.2 of the Instruction. Therefore, this rule is categorically excluded under figure 2–1, paragraph (34)(h), of the Instruction, from further environmental documentation. Special local regulations issued in conjunction with a marine event permit are specifically excluded from further analysis and documentation under those sections. Under figure 2–1, paragraph (34)(h) of the Instruction, an ''Environmental Analysis Check List'' and a ''Categorical

Exclusion Determination'' are not required for this rule.

List of Subjects in 33 CFR Part 100

Marine safety, Navigation (water), Reporting and recordkeeping requirements, Waterways.

■ For the reasons discussed in the preamble, the Coast Guard amends 33 CFR Part 100 as follows:

PART 100—SAFETY OF LIFE ON NAVIGABLE WATERS

■ 1. The authority citation for part 100 continues to read as follows:

Authority: 33 U.S.C. 1233, Department of Homeland Security Delegation No. 0170.1.

■ 2. Add a temporary section, § 100.35–T05–025 to read as follows:

§ 100.35–T05–025 Mill Creek, Hampton, VA.

(a) *Regulated area.* The regulated area is established for the waters of Mill Creek, adjacent to Fort Monroe, Hampton, Virginia, enclosed by the following boundaries: to the north, a line drawn along latitude 37°01′00″ N, to the east a line drawn along longitude 076°18′30″ W, to the south a line parallel with the shoreline adjacent to Fort Monroe, and the west boundary is parallel with the Route 258—Mercury Boulevard Bridge. All coordinates reference Datum NAD 1983.

(b) *Definitions:*

(1) *Coast Guard Patrol Commander* means a commissioned, warrant, or petty officer of the Coast Guard who has been designated by the Commander, Coast Guard Sector Hampton Roads.

(2) *Official Patrol* means any vessel assigned or approved by Commander, Coast Guard Sector Hampton Roads with a commissioned, warrant, or petty officer on board and displaying a Coast Guard ensign.

(3) *Participant* includes all vessels participating in the ''Hampton Cup Regatta'' under the auspices of the Marine Event Permit issued to the event sponsor and approved by Commander, Coast Guard Sector Hampton Roads.

(c) *Special local regulations:*

(1) Except for participating vessels and persons or vessels authorized by the Coast Guard Patrol Commander, no person or vessel may enter or remain in the regulated area.

(2) The operator of any vessel in the regulated area must:

(i) Stop the vessel immediately when directed to do so by any Official Patrol and then proceed only as directed.

(ii) All persons and vessels shall comply with the instructions of the Official Patrol.

(iii) When authorized to transit the regulated area, all vessels shall proceed at the minimum speed necessary to maintain a safe course that minimizes wake near the race course.

(d) *Enforcement period.* This section will be enforced from 7:30 a.m. to 6:30 p.m. on August 18, 19 and 20, 2006.

Dated: June 16, 2006.

Larry L. Hereth,

Rear Admiral, U.S. Coast Guard, Commander, Fifth Coast Guard District.

[FR Doc. E6–10255 Filed 6–28–06; 8:45 am]

BILLING CODE 4910–15–P

DEPARTMENT OF HOMELAND SECURITY

Coast Guard

33 CFR Part 117

[CGD07–04–136]

RIN 1625–AA09

Drawbridge Operation Regulation; Broward County Bridges, Atlantic Intracoastal Waterway, Broward County, FL

AGENCY: Coast Guard, DHS.

ACTION: Final rule.

SUMMARY: The Coast Guard is changing the regulations governing the operation of all Broward County drawbridges across the Atlantic Intracoastal Waterway, Broward County, Florida. This rule will require these drawbridges to open twice an hour. This schedule will meet the reasonable needs of navigation while accommodating increased vehicular traffic flow throughout the county.

DATES: This rule is effective July 31, 2006.

ADDRESSES: Comments and material received from the public, as well as documents indicated in this preamble as being available in the docket, are part of docket [CGD07–04–136] and are available for inspection or copying at Commander (dpb), Seventh Coast Guard District, 909 SE 1st Ave., Ste 432 Miami, Florida 33131–3050 between 7:30 a.m. and 4 p.m., Monday through Friday, except Federal holidays.

FOR FURTHER INFORMATION CONTACT: Mr. Gwin Tate, Seventh Coast Guard District Bridge Branch, (305) 415–6747.

SUPPLEMENTARY INFORMATION:

Regulatory Information

On August 16, 2005, we published a notice of proposed rulemaking (NPRM) entitled Drawbridge Operation Regulations; Broward County Bridges, Atlantic Intracoastal Waterway, Broward County, Florida in the **Federal Register** (70 FR 157). We received 86 letters commenting on the proposed rule. No public meeting was requested, and none was held

Background and Purpose

At the request of Broward County, the Coast Guard published a temporary deviation as a test regulation for Broward County drawbridges in the **Federal Register** (69 FR 67055). The test was conducted for approximately 90 days to collect data to determine the feasibility of changing the regulations on all drawbridges in Broward County crossing the Atlantic Intracoastal Waterway, to meet the increased demands of vehicular traffic and still provide for the reasonable needs of navigation. The test results indicated that the proposed schedule allowed both vehicular and vessel traffic the opportunity to predict, on a scheduled basis, when the bridges might be in the open position. We received 205 comments, 182 were in favor of the test schedules, 13 were in favor of keeping the existing schedules, 8 comments provided other recommended opening schedules, and 2 were general in nature.

In light of the test period, the Coast Guard published a Notice of Proposed Rulemaking in the **Federal Register** on August 16, 2005 (70 FR 48088) [CGD07–04–136], delineating this proposed new schedule. Due to the active hurricane season and lack of public comments to the previous Notice of Proposed Rulemaking, we issued a Supplemental Notice of Proposed Rulemaking in the **Federal Register** on January 31, 2006 (71 FR 5030) [CGD07–04–136]. We received 89 comments: 2 petitions with 58 signatures in favor of the schedules, 79 letters from individual citizens in favor of the schedules, 2 letters from municipalities in favor of the schedules, 5 letters from condominium associations in favor of the schedules, and 1 letter opposing the new schedules.

The change in operating regulations was requested by Broward County to reduce burdens on county roadways and to standardize drawbridge openings throughout the county. The rule will allow all drawbridges crossing the Atlantic Intracoastal Waterway in Broward County to operate on a standardized schedule that would meet the reasonable needs of navigation and address vehicular traffic congestion.

Discussion of Comments and Changes

We received 89 comments: 2 petitions with 58 signatures in favor of the schedules, 79 letters from individual

citizens in favor of the schedules, 2 letters from municipalities in favor of the schedules, 5 letters from condominium associations in favor of the schedules, and 1 letter opposing the new schedules. One commenter felt that changing on-demand openings to timed openings would be hazardous to vessels. The Coast Guard disagrees, as the previous test period and extensive study disclosed that having the bridges placed on a schedule would enable vessel traffic to predict when a drawbridge might open, thereby allowing trips to be timed so as to reach a drawbridge when it is in the open position.

Regulatory Evaluation

This rule is not a ''significant regulatory action'' under section 3(f) of Executive Order 12866, Regulatory Planning and Review, and does not require an assessment of potential costs and benefits under section 6(a)(3) of that Order. The Office of Management and Budget has not reviewed it under that Order. It is not ''significant'' under the regulatory policies and procedures of the Department of Homeland Security (DHS).

We expect the economic impact of this rule to be so minimal that a full Regulatory Evaluation under the regulatory policies and procedures of DHS is unnecessary. The rule will provide timed openings for vehicular traffic and sequenced openings for vessel traffic and should have little economic impact.

Small Entities

Under the Regulatory Flexibility Act (5 U.S.C. 601–612), we have considered whether this rule would have a significant economic impact on a substantial number of small entities. The term ''small entities'' comprises small businesses, not-for-profit organizations that are independently owned and operated and are not dominant in their fields, and governmental jurisdictions with populations of less than 50,000.

The Coast Guard certifies under 5 U.S.C. 605(b) that this rule will not have a significant economic impact on a substantial number of small entities, as the rule will provide timed openings for vehicular traffic and sequenced openings for vessel traffic.

Assistance for Small Entities

Under section 213(a) of the Small Business Regulatory Enforcement Fairness Act of 1996 (Public Law 104–121), we offered to assist small entities in understanding the rule so that they could better evaluate its effects on them and participate in the rulemaking process. Small businesses may send comments on the actions of Federal employees who enforce, or otherwise determine compliance with, Federal regulations to the Small Business and Agriculture Regulatory Enforcement Ombudsman and the Regional Small Business Regulatory Fairness Boards. The Ombudsman evaluates these actions annually and rates each agency's responsiveness to small business. If you wish to comment on actions by employees of the Coast Guard, call 1–888–REG–FAIR (1–888–734–3247).

Collection of Information

This rule calls for no new collection of information under the Paperwork Reduction Act of 1995 (44 U.S.C. 3501–3520).

Federalism

A rule has implications for federalism under Executive Order 13132, Federalism, if it has a substantial direct effect on State or local governments and would either preempt State law or impose a substantial direct cost of compliance on them. We have analyzed this rule under that Order and have determined that it does not have implications for federalism.

Unfunded Mandates Reform Act

The Unfunded Mandates Reform Act of 1995 (2 U.S.C. 1531–1538) requires Federal agencies to assess the effects of their discretionary regulatory actions. In particular, the Act addresses actions that may result in the expenditure by a State, local, or tribal government, in the aggregate, or by the private sector of $100,000,000 or more in any one year. Though this rule will not result in such an expenditure, we do discuss the effects of this rule elsewhere in this preamble.

Taking of Private Property

This rule will not affect a taking of private property or otherwise have taking implications under Executive Order 12630, Governmental Actions and Interference with Constitutionally Protected Property Rights.

Civil Justice Reform

This rule meets applicable standards in sections 3(a) and 3(b)(2) of Executive Order 12988, Civil Justice Reform, to minimize litigation, eliminate ambiguity, and reduce burden.

Protection of Children

We have analyzed this rule under Executive Order 13045, Protection of Children from Environmental Health Risks and Safety Risks. This rule is not an economically significant rule and would not create an environmental risk to health or risk to safety that might disproportionately affect children.

Indian Tribal Governments

This rule does not have tribal implications under Executive Order 13175, Consultation and Coordination with Indian Tribal Governments, because it does not have a substantial direct effect on one or more Indian tribes, on the relationship between the Federal Government and Indian tribes, or on the distribution of power and responsibilities between the Federal Government and Indian tribes.

Energy Effects

We have analyzed this rule under Executive Order 13211, Actions Concerning Regulations That Significantly Affect Energy Supply, Distribution, or Use. We have determined that it is not a ''significant energy action'' under that order because it is not a ''significant regulatory action'' under Executive Order 12866 and is not likely to have a significant adverse effect on the supply, distribution, or use of energy. The Administrator of the Office of Information and Regulatory Affairs has not designated it as a significant energy action. Therefore, it does not require a Statement of Energy Effects under Executive Order 13211.

Technical Standards

The National Technology Transfer and Advancement Act (NTTAA) (15 U.S.C. 272 note) directs agencies to use voluntary consensus standards in their regulatory activities unless the agency provides Congress, through the Office of Management and Budget, with an explanation of why using these standards would be inconsistent with applicable law or otherwise impractical. Voluntary consensus standards are technical standards (*e.g.*, specifications of materials, performance, design, or operation; test methods; sampling procedures; and related management systems practices) that are developed or adopted by voluntary consensus standards bodies.

This rule does not use technical standards. Therefore, we did not consider the use of voluntary consensus standards.

Environment

We have analyzed this rule under Commandant Instruction M16475.lD, which guides the Coast Guard in complying with the National Environmental Policy Act of 1969 (NEPA)(42 U.S.C. 4321–4370f), and have concluded that there are no factors in this case that would limit the use of

a categorical exclusion under section 2.B.2 of the Instruction. Therefore, this rule is categorically excluded, under figure 2–1, paragraph (32)(e) of the Instruction, from further environmental documentation. Under figure 2–1, paragraph (32) (3), of the Instruction, an ''Environmental Analysis Check List'' and a ''Categorical Exclusion Determination'' are not required for this rule.

List of Subjects in 33 CFR Part 117

Bridges.

Regulations

■ For the reasons discussed in the preamble, the Coast Guard amends 33 CFR part 117 as follows:

PART 117—DRAWBRIDGE OPERATION REGULATIONS

■ 1. The authority citation for part 117 continues to read as follows:

Authority: 33 U.S.C. 499; Department of Homeland Security Delegation No. 0170.1; 33 CFR 1.05–1(g); section 117.255 also issued under the authority of Pub. L. 102–587, 106 Stat. 5039.

■ 2. In § 117.261, remove and reserve paragraphs (cc), (dd), (ee), (ff), (gg), (hh), (jj), and (kk) and revise paragraph (bb) to read as follows:

§ 117.261 Atlantic Intracoastal Waterway from St. Mary's River to Key Largo.

* * * * *

(bb) Broward County (1) Hillsboro Boulevard bridge (SR 810), mile 1050.0 at Deerfield Beach. The draw shall open on the hour and half-hour.

(2) NE 14th Street bridge, mile 1055.0 at Pompano. The draw shall open on the quarter-hour and three-quarter hour.

(3) Atlantic Boulevard (SR 814) bridge, mile 1056.0 at Pompano. The draw shall open on the hour and half-hour.

(4) Commercial Boulevard (SR 870) bridge, mile 1059.0, at Lauderdale-by-the-Sea. The draw shall open on the hour and half-hour.

(5) Oakland Park Boulevard bridge, mile 1060.5 at Fort Lauderdale. The draw shall open on the quarter-hour and three-quarter hour.

(6) East Sunrise Boulevard (SR 838) bridge, mile 1062.6, at Fort Lauderdale. The draw shall open on the hour and half-hour. On the first weekend in May, the draw need not open from 4 p.m. to 6 p.m on Saturday and Sunday, and, on the first Saturday in May, the draw need not open from 9:45 p.m. to 10:45 p.m.

(7) East Las Olas bridge, mile 1064 at Fort Lauderdale. The draw shall open on the quarter-hour and three-quarter hour. On the first weekend in May, the draw need not open from 4 p.m. to 6 p.m on Saturday and Sunday, and, on the first Saturday in May, the draw need not open from 9:45 p.m. to 10:45 p.m.

(8) SE 17th Street (Brooks Memorial) bridge, mile 1065.9 at Fort Lauderdale. The draw shall open on the hour and half-hour.

(9) Dania Beach Boulevard bridge, mile 1069.4 at Dania Beach. The draw shall open on the hour and half-hour.

(10) Sheridan Street bridge, mile 1070.5, at Fort Lauderdale. The draw shall open on the quarter-hour and three-quarter hour.

(11) Hollywood Beach Boulevard (SR 820) bridge, mile 1072.2 at Hollywood. The draw shall open on the hour and half-hour.

(12) Hallandale Beach Boulevard (SR 824) bridge, mile 1074.0 at Hallandale. The draw shall open on the quarter-hour and three-quarter hour.

* * * * *

Dated: June 20, 2006.

D.W. Kunkel,

Rear Admiral, U.S. Coast Guard, Commander, Seventh Coast Guard District.

[FR Doc. E6–10252 Filed 6–28–06; 8:45 am]

BILLING CODE 4910–15–P

DEPARTMENT OF HOMELAND SECURITY

Coast Guard

33 CFR Part 117

[CGD05–05–041]

RIN 1625–AA09

Drawbridge Operation Regulations; Atlantic Intracoastal Waterway (AICW), Elizabeth River, Southern Branch, Virginia

AGENCY: Coast Guard, DHS.

ACTION: Final rule.

SUMMARY: The Coast Guard is changing the regulations that govern the operation of the Dominion Boulevard (US 17) Bridge across the Southern Branch of the Elizabeth River, at Atlantic Intracoastal Waterway (AICW) mile 8.8, at Chesapeake, Virginia. The final rule will provide for hourly openings of the draw which will now start at 6 a.m. on weekdays and weekends and will not change the morning and evening rush hours, which are from 7 a.m. to 9 a.m. and from 4 p.m. to 6 p.m., respectively. The Dominion Boulevard (US 17) Bridge will continue to open on signal at any time for commercial vessels carrying liquefied flammable gas or other hazardous materials, and for commercial vessels that provide a two-hour advance notice. At all other times, the draw shall open on signal. These changes are necessary in order to relieve increased vehicular traffic congestion on weekends and between the weekday morning and evening rush hour periods while still providing for the reasonable needs of navigation.

DATES: This rule is effective July 31, 2006.

ADDRESSES: Comments and material received from the public, as well as documents indicated in this preamble as being available in the docket, are part of docket CGD05–05–041 and are available for inspection or copying at Commander (dpb), Fifth Coast Guard District, Federal Building, 1st Floor, 431 Crawford Street, Portsmouth, VA 23704–5004 between 8 a.m. and 4 p.m., Monday through Friday, except Federal holidays. The Fifth Coast Guard District maintains the public docket for this rulemaking.

FOR FURTHER INFORMATION CONTACT: Waverly W. Gregory, Jr., Bridge Administrator, Fifth Coast Guard District, at (757) 398–6222.

SUPPLEMENTARY INFORMATION:

Regulatory History

The Coast Guard published in the **Federal Register** (69 FR 75472) a temporary 90-day deviation and request for comments from the drawbridge operation regulations in an effort to test an alternate drawbridge operation schedule and to solicit comments from the public. The deviation was in effect from December 13, 2004 to March 13, 2005, and from 8:30 a.m. to 4 p.m., Monday through Friday, except Federal holidays, the draw was opened only every hour on the half hour. Fifty-two e-mail messages and 4 on-paper responses were received during the comment period that ended March 14, 2005.

On May 10, 2005, we published a notice of proposed rulemaking (NPRM) entitled ''Drawbridge Operation Regulations; Atlantic Intracoastal Waterway (AICW), Elizabeth River, Southern Branch, VA'' in the **Federal Register** (70 FR 24492). We received 690 comments on the proposed rule. No public hearing was requested, and none was held.

On August 19, 2005, we published an interim rule with request for comment entitled ''Drawbridge Operation Regulations; Atlantic Intracoastal Waterway (AICW), Elizabeth River, Southern Branch, VA'' in the **Federal Register** (70 FR 48637). We received 28 e-mail messages and 4 on-paper responses on the interim rule. No public

meeting was requested, and none was held.

On January 13, 2006, we published an interim rule; reopening of comment period and a notice of public meeting entitled ''Drawbridge Operation Regulations; Atlantic Intracoastal Waterway, Elizabeth River, Southern Branch, VA'' in the **Federal Register** (71 FR 2151) and (70 FR 2176), respectively.

Background and Purpose

The current interim rule operating regulations require the Dominion Boulevard (US 17) Bridge across the Southern Branch of Elizabeth River, at AICW mile 8.8, to open on signal at any time for commercial vessels carrying liquefied flammable gas or other hazardous materials and for commercial vessels that provide a two-hour advance notice. In addition, from 9 a.m. to 4 p.m., Monday through Friday and from 7 a.m. to 6 p.m. on Saturdays, Sundays and Federal holidays, the draw opens every hour on the hour. From 7 a.m. to 9 a.m. and from 4 p.m. to 6 p.m., Monday to Friday, except Federal holidays, the draw need not open for recreational vessels and commercial vessels carrying non-hazardous material that do not provide a 2-hour advance notice.

On December 17, 2004, we published a notice of temporary deviation from the regulations and request for comments entitled ''Drawbridge Operation Regulations; Atlantic Intracoastal Waterway (AICW), Elizabeth River, Southern Branch, VA'' in the **Federal Register** (69 FR 75472). The temporary deviation was an effort to test an alternate drawbridge operation schedule for 90 days and to solicit comments from the public. In accordance with the temporary deviation, from December 13, 2004 to March 13, 2005, from 8:30 a.m. to 4 p.m., Monday through Friday, except Federal holidays, the draw was opened only every hour on the half hour.

The Coast Guard received 52 e-mail messages and 4 on-paper responses commenting on the provisions of the temporary deviation. The majority of the comments from motorists favored scheduled versus unscheduled bridge openings, so they could better plan their movements. Many respondents indicated that even though the vehicular rush hour traffic starts at 6:30 a.m., the weekday rush hour traffic peaks between 7 a.m. and 9 a.m. In addition, they stated a preference that commercial vessels carrying non-hazardous materials be regulated. However, since tugs and tugs with tows have no place to tie up in the proximity of the bridge in order to wait for a bridge opening, the Coast Guard will continue to include them in the 2-hour advance notice requirement. Bridge records supplied by the City of Chesapeake indicate that the 2-hour advance notice requirement occurs about 10 times a month. Commercial vessel operators make a determined effort to schedule their transits on the hour and to circumvent the morning and evening rush hour closure periods for the Dominion Boulevard Bridge.

The NPRM, which was published on May 10, 2005, proposed on-signal openings for commercial vessels carrying hazardous materials and for commercial vessels that provide a two-hour advance notice. In addition, the NPRM proposed that year-round from 9 a.m. to 4 p.m., Monday through Friday, except Federal holidays, the draw need be opened every hour on the hour. From 7 a.m. to 9 a.m. and from 4 p.m. to 6 p.m., Monday to Friday, except Federal holidays, the draw need not open for recreational vessels and commercial vessels carrying non-hazardous material that do not provide a 2-hour advance notice.

We received 690 comments from the public on the NPRM. The majority of respondents favored scheduled openings of the drawbridge year-round between the morning and evening rush hour periods. As a result of these comments, on August 19, 2005, we published an interim rule with request for comment in the **Federal Register** (70 FR 48637) that changed the operating regulations for the Dominion Boulevard Bridge. We received 28 e-mail messages and 4 on-paper responses from the public.

After the interim rule comment period ended on October 3, 2005, we also received a number of unfavorable comments, many by telephone and e-mail, on the provisions of the interim rule from local commuters and recreational vessels that are referred to as ''snowbirds''. During the spring and fall months, the flow of recreational vessels is constant. There were approximately 7400 vessel passages occurring in 2005 over a five-month period (April, May, June, October and November) according to records furnished by the City of Chesapeake. Owners of these transitory recreational vessels are either traveling north to south towards a warmer climate in the fall or south to north towards a cooler climate in the spring and this can result in frequent bridge openings due to their numbers. (See Table A)

TABLE A

[Bridge Openings for 2005]

Jan.	Feb.	Mar.	Apr.	May	Jun.	Jul.	Aug.	Sep.	Oct.	Nov.	Dec.
262	255	359	503	724	502	484	384	423	461	407	310

[Boat Passages for 2005]

Jan.	Feb.	Mar.	Apr.	May	Jun.	Jul.	Aug.	Sep.	Oct.	Nov.	Dec.
335	320	475	934	1911	1612	873	593	683	1660	1285	503

Based on all of the information received, we have made changes to the final rule for the Dominion Boulevard Bridge.

On January 13, 2006, we published an interim rule; reopening of the comment period in the **Federal Register** (71 FR 2151) because the Dominion Boulevard Bridge is utilized frequently and members of the public and the Mayor of Chesapeake communicated to the Coast Guard that they wanted to make additional comments. Concurrently, we also published a notice of public meeting in the **Federal Register** (71 FR 2177). On March 1, 2006, from 3 p.m. to 8 p.m., we held the public meeting at the Chesapeake Central Library, at 298 Cedar Road, in Chesapeake, Virginia. The purpose of this public meeting was to provide an opportunity for citizens to

provide oral or written comments regarding the changes to the regulations that govern the operation of the Dominion Boulevard Bridge. Requests to make oral presentations on the interim rule at the public meeting ended on February 28, 2006. Written comments ended on March 10, 2006.

We received 195 comments from the public on the interim rule, including 32 oral remarks received at the public meeting.

Discussion of Comments and Changes

The Coast Guard received 195 responses to the interim rule. The responses were supplied by 70 e-mails, 33 on-paper comments, 60 comments accepted from an internet Web site survey posted by the City of Chesapeake along with 32 oral remarks offered at the public meeting.

The majority of the responses could be categorized into one of four groups. One group of respondents preferred that the Coast Guard maintain the interim or current operating regulations for the Dominion Boulevard Bridge with no modifications.

Another group of respondents offered differing adjustments to the morning and evening rush hour closure periods and the hourly opening schedule of the bridge. These respondents, mostly local commuters, generally preferred the changes offered by the City of Chesapeake to adjust the weekday morning and evening rush hour closure period from 6:30 a.m. to 8:30 a.m. and 5 p.m. to 7 p.m., respectively, along with vessel openings every hour on the half-hour between the weekday rush hour periods and on weekends and Federal holidays. The local commuters expressed their opposition to the current morning rush hour closure period from 7 a.m. to 9 a.m. Due to unscheduled openings occurring before 7 a.m. which delayed morning transits on the Dominion Bridge, the commuters preferred that the Coast Guard either maintain the previous morning rush hour closure schedule from 6:30 a.m. to 8:30 a.m. or change the morning closure schedule to 6 a.m. to 8 a.m. Also, a number of the respondents proposed longer drawbridge closure periods to vessels than the current regulations from 6 a.m. to 9 a.m. for the morning rush hour and from 4 p.m. to 7 p.m. for the evening rush hour. They stated a preference that commercial vessels carrying non-hazardous materials be regulated.

The third group of respondents included mariners who opposed the hourly restriction for vessel openings because of the potentially unsafe situation created while transiting this waterway and preferred a less restrictive half-hour opening schedule. Also, mariners in general suggested that if the Dominion Boulevard Bridge was to open only once each hour, an on the hour opening would be preferred.

The fourth group of respondents offered no substantive changes to the current regulations but generally expressed their overall concerns regarding vehicular traffic delays, area development and plans for a higher-level replacement bridge.

The Coast Guard thoroughly examined and considered all of these comments and made minor adjustments to the final rule. Hourly openings of the draw will now begin at 6 a.m. on weekdays and weekends. The draw will also open at 7 a.m. on weekdays, but after this opening will remain closed for the morning rush hour period. The weekday morning and evening rush hours will remain unchanged from 7 a.m. to 9 a.m. and from 4 p.m. to 6 p.m., respectively. (See Table B)

TABLE B

(Current) Interim regulations	Final regulations
Year Round Operating Schedule*	
From 9 a.m. to 4 p.m. Opens every hour on the hour. Commercial vessels must provide a two-hour advance notice for an on-demand opening.**.	From 6 a.m. to 7 a.m. and from 9 a.m. to 4 p.m. Opens every hour on the hour. Commercial vessels must provide a two-hour advance notice for an on-demand opening.**
Saturdays, Sundays and Federal Holidays	
From 7 a.m. to 6 p.m. Opens every hour on the hour. Commercial vessels must provide a two-hour advance notice for an on-demand opening.**.	From 6 a.m. to 6 p.m. Opens every hour on the hour. Commercial vessels must provide a two-hour advance notice for an on-demand opening.**
Rush Hour Restrictions*	
From 7 a.m. to 9 a.m.; and from 4 p.m. to 6 p.m. Need not open. Commercial vessels must provide a two-hour advance notice for an on-demand opening.**.	From 7 a.m. to 9 a.m.; and from 4 p.m. to 6 p.m. Need not open. Commercial vessels must provide a two-hour advance notice for an on-demand opening.**

* Mon. to Fri., except Federal holidays.

** Bridge will open on demand for vessels carrying hazardous liquefied flammable gas or other hazardous materials; and open on demand at all other times.

The modifications made to this final rule will help to address vehicular traffic congestion and reduce traffic delays at the Dominion Boulevard Bridge during and between the weekdays rush hour periods, on weekends and Federal holidays, while still providing for the reasonable needs of navigation.

Discussion of Rule

The Coast Guard amends 33 CFR 117.997, by revising paragraph (g)(3).

Paragraph (g)(3) will be revised to read ''From 6 a.m. to 7 a.m., from 9 a.m. to 4 p.m., Monday to Friday, and from 6 a.m. to 6 p.m. on Saturdays, Sundays and Federal holidays, the draw need only be opened every hour on the hour, except the draw shall open on signal for commercial vessels that qualify under paragraphs (g)(1) or (g)(2) of this section.''

Regulatory Evaluation

This rule is not a ''significant regulatory action'' under section 3(f) of Executive Order 12866, Regulatory Planning and Review, and does not require an assessment of potential costs

and benefits under section 6(a)(3) of that Order. The Office of Management and Budget has not reviewed it under that Order. It is not ''significant'' under the regulatory policies and procedures of the Department of Homeland Security (DHS).

This conclusion based on the fact that the changes have only a minimal impact on maritime traffic transiting the bridge. Mariners can plan their transits in accordance with the scheduled bridge openings, to minimize delays.

Small Entities

Under the Regulatory Flexibility Act (5 U.S.C. 601–612), we have considered whether this rule would have a significant economic impact on a substantial number of small entities. The term ''small entities'' comprises small businesses, not-for-profit organizations that are independently owned and operated and are not dominant in their fields, and governmental jurisdictions with populations of less than 50,000.

The Coast Guard certifies under 5 U.S.C. 605(b) that this rule would not have a significant economic impact on a substantial number of small entities.

This conclusion is based on the fact the rule would not have a significant economic impact on a substantial number of small entities because the rule only adds minimal restrictions to the movement of navigation, and mariners who plan their transits in accordance with the schedule bridge openings minimizes delays.

Assistance for Small Entities

Under section 213(a) of the Small Business Regulatory Enforcement Fairness Act of 1996 (Public Law 104–121), we offered to assist small entities in understanding this rule so that they could better evaluate its effects on them and participate in the rulemaking process. No assistance was requested from any small entity.

Small businesses may send comments on the actions of Federal employees who enforce, or otherwise determine compliance with, Federal regulations to the Small Business and Agriculture Regulatory Enforcement Ombudsman and the Regional Small Business Regulatory Fairness Boards. The Ombudsman evaluates these actions annually and rate each agency's responsiveness to small business. If you wish to comment on actions by employees of the Coast Guard, call 1–800–REG–FAIR (1–800–734–3247).

Collection of Information

This rule calls for no new collection of information under the Paperwork Reduction Act of 1995 (44 U.S.C. 3501–3520.).

Federalism

A rule has implications for federalism under Executive Order 13132, Federalism, if it has a substantial direct effect on State or local governments and would either preempt State law or impose a substantial direct cost of compliance on them. We have analyzed this rule under that Order and have determined that it does not have implications for federalism.

Unfunded Mandates Reform Act

The Unfunded Mandates Reform Act of 1995 (2 U.S.C. 1531–1538) requires Federal agencies to assess the effects of their discretionary regulatory actions. In particular, the Act addresses actions that may result in the expenditure by a State, local, or tribal government, in the aggregate, or by the private sector of $100,000,000 or more in any one year. Though this rule will not result in such an expenditure, we do discuss the effects of this rule elsewhere in this preamble.

Taking of Private Property

This rule would not affect a taking of private property or otherwise have taking implications under Executive Order 12630, Governmental Actions and Interference with Constitutionally Protected Property Rights.

Civil Justice Reform

This rule meets applicable standards in sections 3(a) and 3(b)(2) of Executive Order 12988, Civil Justice Reform, to minimize litigation, eliminate ambiguity, and reduce burden.

Protection of Children

We have analyzed this rule under Executive Order 13045, Protection of Children from Environmental Health Risks and Safety Risks. This rule is not an economically significant rule and would not create an environmental risk to health or risk to safety that might disproportionately affect children.

Indian Tribal Governments

This rule does not have tribal implications under Executive Order 13175, Consultation and Coordination with Indian Tribal Governments, because it would not have a substantial direct effect on one or more Indian tribes, on the relationship between the Federal Government and Indian tribes, or on the distribution of power and responsibilities between the Federal Government and Indian tribes.

Energy Effects

We have analyzed this rule under Executive Order 13211, Actions Concerning Regulations That Significantly Affect Energy Supply, Distribution, or Use. We have determined that it is not a ''significant energy action'' under that order because it is not a ''significant regulatory action'' under Executive Order 12866 and is not likely to have a significant adverse effect on the supply, distribution, or use of energy. The Administrator of the Office of Information and Regulatory Affairs has not designated it as a significant energy action. Therefore, it does not require a Statement of Energy Effects under Executive Order 13211.

Technical Standards

The National Technology Transfer and Advancement Act (NTTAA) (15 U.S.C. 272 note) directs agencies to use voluntary consensus standards in their regulatory activities unless the agency provides Congress, through the Office of Management and Budget, with an explanation of why using these standards would be inconsistent with applicable law or otherwise impractical. Voluntary consensus standards are technical standards (*e.g.*, specifications of materials, performance, design, or operation; test methods; sampling procedures; and related management systems practices) that are developed or adopted by voluntary consensus standards bodies.

This rule does not use technical standards. Therefore, we did not consider the use of voluntary consensus standards.

Environment

We have analyzed this rule under Commandant Instruction M16475.lD and Department of Homeland Security Management Directive 5100.1, which guide the Coast Guard in complying with the National Environmental Policy Act of 1969 (NEPA) (42 U.S.C. 4321–4370f), and have made a preliminary determination that there are no factors in this case that would limit the use of a categorical exclusion under section 2.B.2 of the Instruction. Therefore, we believe that this rule should be categorically excluded, under figure 2–1, paragraph (32)(e) of the Instruction, from further environmental documentation because it has been determined that the promulgation of operating regulations for drawbridges are categorically excluded.

List of Subjects in 33 CFR Part 117

Bridges.

Regulations

■ For the reasons discussed in the preamble, the Coast Guard amends 33 CFR part 117 as follows:

PART 117—DRAWBRIDGE OPERATION REGULATIONS

■ 1. The authority citation for part 117 continues to read as follows:

Authority: 33 U.S.C. 499; Department of Homeland Security Delegation No. 0170.1; 33 CFR 1.05–1(g); section 117.255 also issued under the authority of Pub. L. 102–587, 106 Stat. 5039.

■ 2. In § 117.997, paragraph (g)(3) is revised to read as follows:

§ 117.997 Atlantic Intracoastal Waterway, South Branch of the Elizabeth River to the Albemarle and Chesapeake Canal.

* * * * *

(g) * * *

(1) * * *

(2) * * *

(3) From 6 a.m. to 7 a.m. and from 9 a.m. to 4 p.m., Monday to Friday, and from 6 a.m. to 6 p.m. on Saturdays, Sundays, and Federal holidays, the draw need only be opened every hour on the hour, except the draw shall open on signal for commercial vessels that qualify under paragraphs (g)(1) or (g)(2) of this section.

* * * * *

Dated: June 16, 2006.

L.L. Hereth,

Rear Admiral, United States Coast Guard, Commander, Fifth Coast Guard District.

[FR Doc. 06–5934 Filed 6–28–06; 8:45 am]

BILLING CODE 4910–15–P

DEPARTMENT OF COMMERCE

National Oceanic and Atmospheric Administration

50 CFR Part 660

[Docket No. 051028280–6160–02; I.D. 102105A]

RIN 0648–AT11

Fisheries Off West Coast States; Coastal Pelagic Species Fisheries; Amendment 11

AGENCY: National Marine Fisheries Service (NMFS), National Oceanic and Atmospheric Administration (NOAA), Commerce.

ACTION: Final rule

SUMMARY: NMFS issues this final rule to implement Amendment 11 to the Coastal Pelagic Species (CPS) Fishery Management Plan (FMP), which changes the framework for the annual apportionment of the Pacific sardine harvest guideline along the U.S. Pacific coast. The purpose of this final rule is to achieve optimal utilization of the Pacific sardine resource and equitable allocation of the harvest opportunity for Pacific sardine.

DATES: Effective July 31, 2006.

ADDRESSES: Copies of Amendment 11 entitled *Allocation of the Pacific Sardine Harvest Guideline Amendment 11 to the Coastal Pelagic Species Fishery Management Plan*, and the accompanying environmental assessment/final regulatory flexibility analysis/regulatory impact review may be obtained at the address below.

• Mail: Rodney R. McInnis, Regional Administrator, Southwest Region, NMFS, 501 West Ocean Boulevard, Suite 4200, Long Beach, CA 90802.

FOR FURTHER INFORMATION CONTACT: Joshua Lindsay, Southwest Region, NMFS, (562) 980–4034.

SUPPLEMENTARY INFORMATION: Amendment 11 changes the regional allocation structure of Pacific sardine that has been in place for the last three years and establishes a coastwide, seasonal allocation apportionment. Amendment 11 provides the following allocation formula for the non-tribal share of the harvest guideline: (1) thirty-five percent of the harvest guideline to be allocated coastwide on January 1; (2) reallocate 40 percent of the harvest guideline coastwide, plus any portion not harvested from the initial allocation, on July 1; and (3) reallocate the remaining 25 percent of the harvest guideline coastwide, plus any portion not harvested from earlier allocations, on September 15. A proposed rule to implement Amendment 11 to the Coastal Pelagic Species (CPS) Fishery Management Plan (FMP) was published in the **Federal Register** on November 16, 2005 (70 FR 69502). On January 26, 2006, NMFS Southwest Region (SWR) sent a letter to the Pacific Fishery Management Council (Council) approving Amendment 11 to the CPS FMP.

The Council adopted the CPS FMP in 1998. The CPS FMP was implemented on January 1, 2000 (64 FR 69888, December 15, 1999). The original Pacific sardine allocation formula in the FMP partitioned 33 percent of the annual harvest guideline to the northern subarea and 66 percent to the southern subarea. Nine months after the January start of the fishery (i.e., October 1), the remaining harvest guideline was pooled and reallocated 50 percent - 50 percent to each subarea. The original boundary between the two subareas was 35° 40' N. lat. (approximately Point Piedras Blancas, California). This formula was incorporated into the CPS FMP from existing California state law. The state law was designed to balance the fishing opportunity for Pacific sardine between the southern California-based fleet and the Monterey-based fleet. At the time of the FMP's implementation, this was considered a status quo action (as the Pacific sardine fishery occurred principally in California) with no environmental impacts. No alternative allocation formulae were considered.

After the original CPS FMP was adopted, the Pacific sardine biomass expanded north along the U.S. West Coast allowing fisheries to develop in the Pacific Northwest (Oregon and Washington). With this expansion, under the original formula, the northern area allocation was shared by the Monterey-based fleet and the Oregon and Washington-based fleets. Oregon and Washington-based fleets expressed concern to the Council that the original allocation framework did not provide optimal harvest opportunity to the respective fishery sectors. Generally, the southern California-based fleet starts harvesting Pacific sardine January 1, and the harvest increases steadily throughout the year; the Monterey-based fleet starts in August (tied to market squid availability) and harvest increases through January or February of the following year; Oregon and Washington-based fleets have a more abbreviated season, which starts in June and ends in October. Because these sectors operate on very different schedules, annual allocations help to ensure that each sector receives a reasonable fishing opportunity. Ex-vessel landings in all sectors are driven by domestic and international market forces for Pacific sardines, as well as the availability and markets for other species of economic benefit to the Pacific sardine vessels and processors (e.g., market squid). The northern California-based fleets and the Oregon and Washington-based fleets are also affected by adverse weather which occurs and affects the ability of these fleets to harvest Pacific sardine during such periods.

In April 2003, the Council recommended to NMFS an interim framework for the allocation of Pacific sardine. The revised allocation system: (1) changed the definition of the subareas by moving the geographic boundary between the two areas from 35° 40′ N. lat. to 39° N. lat. (Point Arena, California); (2) moved the date when remaining unharvested Pacific sardine is reallocated to the subareas from October 1 to September 1; (3) changed the percentage of the unharvested

Pacific sardine that is reallocated to the northern subarea and southern subarea from 50 percent to both subareas to 20 percent to the northern subarea and 80 percent to the southern subarea; and (4) reallocated all the unharvested Pacific sardine that remains on December 1 coastwide. The Council requested this allocation framework be in place for the 2003 and 2004 fishing seasons, and also in 2005 if the 2005 harvest guideline was at least 90 percent of the 2003 harvest guideline. NMFS implemented the revised allocation framework by a regulation that was published on September 4, 2003 (68 FR 52523).Using the best available information, the interim allocation framework was developed to address concerns for the short-term until NMFS and the Council had sufficient time to develop a more comprehensive, longer-term allocation framework.

At the June 2005 Council meeting, the Council examined seven alternative long-term allocation schemes, and at that time adopted the regulations set forth in Amendment 11. The Council also recommended a review of the allocation formula in 2008, due to the fact that the Pacific sardine resource, as well as the fisheries and markets that rely on it, are often dynamic and difficult to predict.

For further background information on this action please refer to the preamble of the proposed rule (70 FR 69502).

Comments and Responses

NMFS received three comments electronically regarding Amendment 11 or its implementing rules: two letters were received from an industry organization and one comment was received from a member of the public. Comments were not opposed to the adoption or implementation of the amendment. These comments are addressed here:

Comment 1: One commenter stated a belief that the northern part of the sardine population on the coast may be more variable than the southern part and felt that close monitoring and careful allocation may be needed.

Response: The Pacific sardine population can be hard to predict and variable. However, in April, 2006, the Southwest Fisheries Science Center, with the cooperation of the Northwest Fisheries Science Center, and the Canadian Department of Fisheries and Oceans, conducted a coast-wide sardine research survey off California, Oregon, Washington, and Vancouver Island. The primary goal of this research was a fishery independent estimate of Pacific sardine over most of its known range during the same time period (synoptic) to provide stock structure information without migration introducing possible biases. This was the first cruise of this nature conducted to examine sardine populations; it is expected to provide valuable information towards the understanding of the northern portion of the population as well as sardine stock structure as a whole.

Comment 2: The second commenter asked that NOAA use a precautionary, stepwise approach to ''long-term'' allocation. The comment also provided notes on specific Amendment language from an industry perspective.

Response: NMFS believes that by the Council recommending a review of the allocation formula in 2008, with the objective of examining any new data on the sardine population that could improve the assessment model or allocation scheme, that the Council is moving in a stepwise manner regarding the allotment of the Pacific sardine resource. Most of the notes on the language were in reference to predictions made about the fishery such as future market conditions, possible landings within the two subareas, and the available harvest level. NMFS agrees that it is difficult to truly predict any of these conditions, however it is believed that the Council took a cautious approach when examining these elements during the assessment process of Amendment 11.

Comment 3: The third commenter also expressed the need for expanded research as well as interest in a re-examination of the capacity of the fishery, particularly the open access portion in the Northwest.

Response: As stated previously, a coast-wide sardine research survey has recently been completed with the intent of providing valuable insight into the stock structure and population dynamics of Pacific sardines off the West Coast. Although the Pacific sardine fishery is a federally managed limited entry fishery south of 39° N. lat. and an open access fishery north of 39° N. lat., the States of Oregon and Washington limit the number of vessels allowed in their respective state managed fisheries. Amendment 11 was designed to provide equitable harvest of the sardine resource to all parties involved. Basing the allotments on a coastwide, as opposed to a subarea scale, and using a seasonal approach should enable this to occur.

No changes were made to the regulatory text from the proposed rule.

Classification

The Regional Administrator, Southwest Region, NMFS, determined that the final rule implementing Amendment 11 to the CPS FMP is necessary for the conservation and management of the Pacific sardine fishery and that it is consistent with the Magnuson-Stevens Fishery Conservation and management Act and other applicable laws.

This final rule has been determined to be not significant for the purposes of Executive Order 12866.

Following the proposed rule stage of this action a Final Regulatory Flexibility Analysis (FRFA) was prepared that examines the economic impact this action would have on small entities. The FRFA is available from NMFS (see **ADDRESSES**). A summary of the FRFA follows.

A description of the action, why it is being considered, and the legal basis for this action are contained in the **SUMMARY** and in the **SUPPLEMENTARY INFORMATION** sections of this final rule. This final rule does not duplicate, overlap, or conflict with other Federal rules. There are no reporting, record-keeping, or other compliance requirements of the proposed rule.

Approximately 104 vessels were permitted to operate in the Pacific sardine fisheries off the U.S. West Coast in 2004; 63 vessels were permitted in the Federal CPS limited entry fishery off California (south of 39° N. lat.), while 41 vessels were permitted in Oregon and Washington's state Pacific sardine fisheries. All of these vessels would be considered small businesses under the Small Business Administration standards since the vessels do not have annual receipts in excess of $3.5 million. Therefore, NMFS does not anticipate any disproportionate economic impacts resulting between small and large vessels under the proposed action. Additionally, this proposed action is not likely to significantly affect (both positive and negative effects) these small entities. The purpose of the action is to achieve optimal utilization of the available harvest by all entities through an equitable coastwide allocation. Therefore, vessels in all regions should have an equal opportunity to the resource.

The fleet as it exists in present day is not likely to change over the 2005–2009 period because vessels from California could fish in the U.S. Exclusive Economic Zone off Oregon and Washington without a respective state issued limited entry permit, but would have to land their catches in California. Given the current technology and operational aspects of the Pacific sardine fishery this would not be practicable. Therefore, NMFS believes

that these 63 and 41 vessels will comprise the respective southern and northern subarea fleets in the future. Under the preferred long-term allocation alternative, Pacific sardine landings for CPS for the entire West Coast were projected to increase: (1) 19,674 mt from the status quo over the 2005–2009 period, with a corresponding increase in ex-vessel revenues of $3,076,891, under a 136,000–mt harvest guideline, and a 10 percent annual growth rate in landings for all fishery sectors over the 2005–2009 period (defined as base case); (2) no change in total landings, but an increase of $1,514,553 in ex-vessel revenues under a 72,000 mt harvest guideline, and a 10- percent annual growth rate in landings for all Pacific sardine fishery sectors over the 2005–2009 period (defined as low harvest guideline case or); and, (3) no change in total landings or in total ex-vessel revenues under a 200,000 mt harvest guideline, and a 10–percent annual growth rate in landings for all fishery sectors over the 2005–2009 period (defined as high harvest guideline case). NMFS anticipates a 10–percent annual growth rate per year based on input from the Pacific sardine industry members as to what the Pacific sardine market could accommodate. For the preferred alternative, Pacific sardine landings in the northern subarea sardine fishery were estimated to be 28,141 mt greater than the status quo with ex-vessel revenues increasing by $3.8 million under the base case; a 34,592–mt increase in landings and an increase of $4.7 million in ex-vessel revenue under the low harvest guideline case; and a no increase in landings or in ex-vessel revenue under the high harvest guideline case. Landings in the southern subarea Pacific sardine fishery would decrease by 8,467–mt and ex-vessel revenues would decrease by $743,181 relative to the status quo under the base case; a decrease of 26,011 mt in landings and $3.2 million in ex-vessel revenues under the low harvest guideline case; and, no changes under the high harvest guideline case.

For the 63 CPS limited entry vessels that would be eligible to participate in the southern subarea Pacific sardine fishery, the 8,467 mt loss in landings over the period under the base case, preferred alternative, represents a potential decrease in ex-vessel revenues of $11,797 per vessel from the status quo alternative, which would be 2.6 percent loss in each vessel's projected revenues. For the preferred alternative under the low harvest guideline case, vessels in the southern subarea fishery stand to lose $50,497 each, a 15.3–percent decrease from the status quo, and under the high harvest guideline case there would be no change in vessel earnings from the status quo. These estimates may understate the actual earnings impacts per vessel since only 61 vessels participated in the southern subarea fishery during 2004.

For the 41 vessels that could participate in the northern subarea fishery each would stand to gain $93,173 in ex-vessel revenues over the period under the base case, preferred alternative, a 10.6–percent increase from the status quo alternative. For the preferred alternative under the low harvest guideline case, vessels in the northern subarea fishery gain $114,533 each, a 26.4–percent increase from the status quo, and under the high harvest guideline case there would be no change from the status quo. These estimates may understate the actual earnings impacts per vessel since only 34 vessels recorded landings in the northern subarea fishery during 2004.

The Council considered six alternatives to the preferred alternative in addition to the status quo alternative. All alternatives resulted in ex-vessel revenue gains of various magnitudes for the fishery as a whole except the ''No Action'' alternative in all cases, and alternative 4.b under the low harvest guideline case. Although the proposed alternative did not yield the greatest overall gain, with the least negative impacts to individual vessels from any one region, it was deemed most equitable by industry members when considered relative to the full range of conservation and management objectives constituting optimum yield under the Magnuson-Stevens Act.

The Council prepared an environmental assessment (EA) for Amendment 11 to the CPS FMP and the Assistant Administrator for NMFS concluded that there will be no significant impact on the human environment as a result of this final rule. Section 7 consultations under the Endangered Species Act were initiated with both the U.S. Fish and Wildlife Service and the Protected Resource Division of the NMFS. In both instances it was determined that fishing activities conducted under Amendment 11 and its implementing regulations are not likely to jeopardize the continued existence of any endangered or threatened species or result in the destruction or adverse modification of critical habitat of any such species.

List of Subjects in 50 CFR Part 660

Administrative practice and procedure, Fisheries, Fishing, Indians, Reporting and recordkeeping requirements.

Dated: June 22, 2006.

James W. Balsiger,

Acting Deputy Assistant Administrator for Regulatory Programs, National Marine Fisheries Service.

■ For the reasons set out in the preamble, NMFS amends 50 CFR part 660 as follows:

PART 660—FISHERIES OFF WEST COAST STATES

■ 1. The authority citation for part 660 continues to read as follows:

Authority: 16 U.S.C. 1801 *et seq.*

■ 2. In § 660.502, the definition for ''Initial annual harvest guideline'' is added, in alphabetical order, to read as follows:

§ 660.502 Definitions.

* * * * *

Initial harvest guideline means a specified numerical harvest objective set at the beginning of the fishing season.

* * * * *

■ 3. Section 660.509 is revised to read as follows:

§ 660.509 Closure of directed fishery.

(a) When the annual harvest guideline for either Pacific sardine or Pacific mackerel is reached, the directed fishery for Pacific sardine or Pacific mackerel shall be closed until the beginning of the next fishing season as stated in § 660.510 (a) and (b). The Regional Administrator shall announce in the **Federal Register** the date of closure of the directed fishery for Pacific sardine or Pacific mackerel. Upon such closure, Pacific mackerel may be harvested incidental to the directed fishery for Pacific sardine to the extent permitted by the annual harvest guideline. The Regional Administrator shall announce in the **Federal Register** the amount of the incidental trip limit, if any, that was recommended by the Council and approved by NMFS.

(b) When the allocation and reallocation levels for Pacific sardine in § 660.511 (f)-(h) are reached, the Pacific sardine fishery shall be closed until either it re-opens per the allocation scheme in § 660.511 (g) and (h) or the beginning of the next fishing season as stated in § 660.510 (a). The Regional Administrator shall announce in the **Federal Register** the date of the closure of the directed fishery for Pacific sardine.

■ 4. In § 660.511 paragraph (f) is revised, and paragraphs (g), and (h) are added to read as follows:

§ 660.511 Catch restrictions.

* * * * *

(f) On January 1, 35 percent of the initial harvest guideline for Pacific sardine is allocated coastwide within the fishery management area.

(g) On July 1, 40 percent of the initial harvest guideline for Pacific sardine plus the remaining unharvested portion of the January 1 allocation in (f) is allocated coastwide within the fishery management area.

(h) On September 15, 25 percent of the initial harvest guideline for Pacific sardine plus the remaining unharvested portion of the July 1 allocation is allocated coastwide within the fishery management area.

[FR Doc. 06–5816 Filed 6–28–06; 8:45 am]

BILLING CODE 3510–22–S

Proposed Rules

Federal Register
Vol. 71, No. 125
Thursday, June 29, 2006

This section of the FEDERAL REGISTER contains notices to the public of the proposed issuance of rules and regulations. The purpose of these notices is to give interested persons an opportunity to participate in the rule making prior to the adoption of the final rules.

OFFICE OF PERSONNEL MANAGEMENT

5 CFR Part 950

RIN 3206–AL05

Solicitation of Federal Civilian and Uniformed Service Personnel for Contributions to Private Voluntary Organizations—Eligibility and Public Accountability Standards

AGENCY: Office of Personnel Management.

ACTION: Proposed rule.

SUMMARY: The Office of Personnel Management (OPM) is issuing proposed changes in eligibility requirements and public accountability standards, and to several other parts of the regulations, for the Combined Federal Campaign (CFC). These proposed changes are intended to streamline the significant eligibility requirements and public accountability standards and other administrative areas to reduce the burden on applicant charitable organizations seeking to qualify for the CFC, simplify the administrative process of determining whether charitable organizations are eligible to participate in the CFC and facilitate modernization of the CFC program.

DATES: We will consider comments received by August 14, 2006.

ADDRESSES: You may submit comments, identified by RIN number, by any of the following methods:

- Federal eRulemaking Portal: *http://www.regulations.gov.* Follow the instructions for submitting comments.
- E-mail: *cfc@opm.gov.* Include ''RIN 3206–AL05'' in the subject line of the message.
- Fax: (202) 606–0902.
- Mail: Mara T. Patermaster, Director, Office of CFC Operations, U.S. Office of Personnel Management, Room 5450, 1900 E Street, NW., Washington, DC 20415.
- Hand Delivery/Courier: Director, Office of CFC Operations, U.S. Office of Personnel Management, Room 5450, 1900 E Street, NW., Washington, DC 20415.

FOR FURTHER INFORMATION CONTACT: Mark W. Lambert, Senior Compliance Officer for the Office of CFC Operations, by telephone on (202) 606–2564, by FAX on (202) 606–0902, or by e-mail at *cfc@opm.gov.*

SUPPLEMENTARY INFORMATION: The CFC regulations were last revised more than 10 years ago. OPM is issuing proposed changes to its regulations governing the solicitation of Federal civilian and uniformed services personnel at the workplace for contributions to private non-profit organizations through the CFC under the authority of Executive Order 12353 (March 23, 1982). OPM has plenary authority under 5 CFR part 950 to administer the CFC in compliance with legal standards. Public Law (Pub. L.) 100–202 § 101(m), requires OPM to maintain certain eligibility criteria for CFC participation by organizations and federations as well as public accountability standards similar to those that were in effect between 1984 and 1987. These CFC criteria were designed to offer donors assurances of the integrity of the program's participating charitable organizations. However, assuring compliance has created a burdensome application and review process for charitable organizations, locally within each campaign for Local Federal Coordinating Committees (LFCC) and within OPM. At the time when the CFC was established in the 1960s, OPM filled a regulatory void by setting standards for evaluating the fiscal accountability and governance of charitable organizations. Today, this role is better served by the industry, its oversight organizations and the Internal Revenue Service Division of Tax Exempt and Government Entities. The changes proposed will put more responsibility on the donor to perform research on charitable organizations and to utilize industry oversight groups to ensure that their donations are being used effectively and efficiently by these organizations.

There are currently 16 core standards of eligibility and public accountability and 3 core administrative requirements that a charitable organization must satisfy in order to participate in the CFC. These appear in the form of certifications in the annual application. Many require documentation, such as audited financial statements and an annual report to demonstrate compliance. The proposed changes to these regulations remove eight of the standards, including the requirement that participating organizations' administrative and fundraising expenses not exceed 25 percent of its total revenue. As a service to donors, OPM will still require the applicant to calculate the administrative and fundraising rate (AFR) and report it to donors. Some of the remaining standards will be modified to eliminate documented proof of compliance. OPM will retain the right to request documented evidence of compliance with CFC regulations from any applicant or participating organization. Failure to provide evidence of compliance that is satisfactory to OPM may result in a denial to participate in the CFC or removal from the CFC. OPM will retain eight of the standards and three core administrative requirements for applicant organizations. The standards and administrative requirements that will be retained are as follows:

1. 5 CFR 950.202(a)—National List Eligibility Requirements—Certify that it provides or conducts real services, benefits, assistance, or program activities, in 15 or more different states or a foreign country over the 3 year period immediately preceding the start of the year involved. The regulations will be clarified to indicate that a detailed schedule is required as part of the application that describes activities in each state or foreign country in each year.

2. 5 CFR 950.202(b)—National List Eligibility Requirements—Certify that it is recognized by the Internal Revenue Service as tax-exempt under 26 U.S.C. 501(c)(3) and to which contributions are tax-deductible pursuant to 26 U.S.C. 170(c)(2). OPM proposes to clarify that these organizations must be public charities, not private foundations.

3. 5 CFR 950.203(a)(1)—Public Accountability Standards—Certify that the organization is a human health and welfare organization providing services, benefits, or assistance to, or conducting activities affecting, human health and welfare. No changes are proposed to this standard.

4. 5 CFR 950.203(a)(2)—Public Accountability Standards—Certify that it accounts for its funds in accordance with generally accepted accounting

principles (GAAP) and that an audit of the organization's fiscal operations is completed annually by an independent certified public accountant in accordance with generally accepted auditing standards (GAAS). This standard will be revised to apply only to organizations which report $250,000 or more in revenue on the organization's IRS Form 990. If an organization indicates revenue of less than $250,000 on its IRS Form 990, then it will be required to certify that it has controls in place to ensure that funds are properly accounted for and that it can provide accurate timely financial information to interested parties. OPM proposes to raise the revenue threshold amount to reduce unnecessary administrative burdens and expenses to otherwise financially accountable organizations with smaller budgets. Such applicants will no longer be required to submit a copy of a recent audit with their application. However, OPM retains the right to request a copy of the audit and to sanction or penalize the organization if it does not timely produce an acceptable copy.

5. 5 CFR 950.203(a)(3)—Public Accountability Standards—Provide a completed copy of the organization's IRS Form 990, including signature, with the application regardless of whether or not the IRS requires the organization to file this form. OPM proposes to revise this standard to make it a certification. OPM will continue to require a copy of the completed IRS Form 990 together with supplemental statements and Schedule A to be included with the application. If the organization does not file an IRS Form 990, OPM will nonetheless require submission of a pro forma IRS Form 990, page 1 only. OPM will no longer routinely check to determine whether the IRS Form 990 revenues and expenses reported reconcile with the audited financial statements. This reconciliation is required to be performed on the IRS Form 990 in Parts IV–A and IV–B by the organization. OPM strongly encourages Federal donors to utilize the variety of reports and information on participating CFC charities which is publicly available, through the Internet and other sources, to satisfy themselves regarding the financial accountability of any given organization.

6. 5 CFR 950.203(a)(4)—Public Accountability Standards—Provide a computation of the organization's percentage of total support and revenue spent on administrative and fundraising. This percentage shall be computed from information on the IRS Form 990, submitted pursuant to § 950.203(a)(3), by adding the amount spent on ''management and general'' (line 14) to ''fundraising'' (line 15) and then dividing the sum by ''total revenue'' (line 12). No changes are proposed to this standard, but references to specific lines of the IRS Form 990 will be removed in anticipation of future changes to the Form.

7. 5 CFR 950.203(a)(5)—Public Accountability Standards—Certify that the organization is directed by an active and responsible governing body whose members have no material conflict of interest and a majority of which serve without compensation. No changes are proposed to this standard.

8. 5 CFR 950.203(a)(8)—Public Accountability Standards—Certify that contributions are effectively used for the announced purposes of the charitable organization. No changes are proposed to this standard.

9. 5 CFR 950.203(a)(12)—Public Accountability Standards—Provide a statement that the certifying official is authorized by the organization to certify and affirm all statements required for inclusion on the national list. No changes are proposed to this requirement.

10. 5 CFR 950.203(a)(13)—Public Accountability Standards—Provide a statement in 25 words or less describing the program activities of the charitable organization. This will be removed as a standard, but it is retained as an administrative requirement in 5 CFR 950.401(g)(2) and will be required from each charitable organization completing the CFC application.

11. 5 CFR 950.605—Sanctions Compliance Certification—Each federation, federation member and unaffiliated organization applying for participation in the CFC must, as a condition of participation, complete a certification that it is in compliance with all statutes, Executive orders, and regulations restricting or prohibiting U.S. persons from engaging in transactions and dealings with countries, entities or individuals subject to economic sanctions administered by the U.S. Department of the Treasury's Office of Foreign Assets Control (OFAC). No changes are proposed to this certification.

The eight standards that will be removed are:

1. 5 CFR 950.202(c)—National List Eligibility Requirements—Certify that the organization has no expenses connected with lobbying and attempts to influence voting or legislation at the local, State, or Federal level or alternatively, that those expenses would classify the organization as a tax-exempt organization under 26 U.S.C. 501(h). OPM proposes to remove this standard because it is already a requirement for charitable organizations to qualify as a tax-exempt entity under section 501(c)(3) of the Internal Revenue Code and to maintain that status with the IRS. In addition, some applicant organizations have misinterpreted the standard to mean that no lobbying is permitted, when, in fact, lobbying is permissible if consistent with Internal Revenue Code requirements.

2. 5 CFR 950.203(a)(4)(i)—Public Accountability Standards—If an organization's administrative and fundraising expenses exceed 25 percent of its total support and revenue, it must certify that its actual expenses for administration and fundraising are reasonable under all the circumstances presented. It must provide an explanation with its application and also include a formal plan to reduce these expenses below 25 percent. OPM proposes to remove the 25 percent threshold for administrative and fundraising rates because Federal employees participating in the CFC should be knowledgeable donors and may consult a variety of publicly available reports and publications, many on the Internet, to learn about the administrative and fund raising status of charities they are considering for their donations. Federal donors also can and should review the annual CFC brochure itself which will continue to report the administrative and fundraising rate of all participating charities to determine whether an organization's administrative and fundraising rate is acceptable to that donor. OPM encourages Federal donors to be as knowledgeable as possible about the organizations which they support.

3. 5 CFR 950.203(a)(4)(ii)—Public Accountability Standards—The Director may reject any application from an organization with fundraising and administrative expenses in excess of 25 percent of total support and revenue, unless the organization demonstrates to the satisfaction of the Director that its actual expenses for those purposes and its plan to reduce them are reasonable under the circumstances. OPM believes that Federal employees should have an opportunity to donate to a wide range of charitable organizations and should not be limited in their choice to those charities with particular administrative and fundraising rates deemed acceptable to OPM, so long as the rate information is available to them to make an informed decision. In addition, this requirement conforms to the proposed removal of 5 CFR 950.203(a)(4)(i). As in other proposed regulatory changes, OPM encourages Federal donors to be

knowledgeable about those charities to which they choose to donate.

4. 5 CFR 950.203(a)(6)—Public Accountability Standards—Certify that the organization's fundraising practices prohibit the sale or lease of its CFC contributor lists. This standard applied only when a donor authorized the release of his or her contact information to the organization. Although this standard is being removed, the requirement for a donor to authorize his or her contact information will be retained. If a donor does not authorize this release, then his or her contact information will be kept confidential by the Principal Combined Fund Organization (PCFO) as proprietary information as required by 5 CFR 950.601(c). OPM believes that once a donor authorizes the release of his or her contact information, the use of this information, including whether it may be sold or be subject to other commercial activity, is an issue between the donor and the charitable organization and not one that OPM can track or enforce. OPM looks forward to comments on this proposed change to consider steps OPM might take to increase potential donor awareness of the possible implications of releasing donor information to a charity.

5. 5 CFR 950.203(a)(7)—Public Accountability Standards—Certify that its publicity and promotional activities are based upon its actual program and operations, are truthful and non-deceptive, and make no exaggerated or misleading claims. OPM believes this standard is redundant and is adequately safeguarded by enforcement of other public accountability standards.

6. 5 CFR 950.203(a)(9)—Public Accountability Standards—Certify under which governmental entity the charitable organization is chartered, incorporated or organized (congressionally chartered or the state in which it is registered). OPM believes this information is not required to enforce and monitor public accountability, particularly in view of appropriate presentation of IRS employer identification numbers.

7. 5 CFR 950.203(a)(10)—Public Accountability Standards—Certify that the organization has received no more than 80 percent of its total support and revenues from government sources as computed by dividing line 1c by line 12 from the IRS Form 990 submitted pursuant to § 950.203(a)(3). The IRS already requires charitable organizations to meet a public support test in order to obtain and maintain its 501(c)(3) tax-exempt status. Therefore, this standard is duplicative of 5 CFR 950.202(b).

8. 5 CFR 950.203(a)(11)—Public Accountability Standards—Certify that the organization prepares and makes available to the public upon request an annual report that includes a full description of the organization's activities and supporting services and identifies its directors and chief administrative personnel. The significant information sought in the annual report is already certified to or obtained from application of other eligibility requirements and public accountability standards contained in 5 CFR 950.202(a) and 5 CFR 950.203(a)(3). In addition, OPM will encourage donors to obtain an annual report directly from the charity, if the donor would like to seek further information on the charity.

Corresponding changes will be made to the local list eligibility requirements and national and local federation standards contained in 5 CFR 950.204, 950.301, and 950.303. However, national, international and local federations will still be required to submit evidence of compliance with the audit, financial, governance and annual report requirements. These requirements will be clarified in 5 CFR 950.301(e)(2) and 950.303(e)(2). Federations provide services to 15 or more member organizations. Services include the receipt and distribution of funds through the CFC. Because federations handle approximately 80 percent of all funds distributed through the CFC, the documented evidence of compliance for federations will continue to be required.

In addition to the changes described above, OPM is proposing 35 other administrative regulatory changes to clarify information and processes within the CFC, address areas of concern noted over the years by OPM and stakeholders, and to recognize the use of electronic technology in the administration of the CFC program. These administrative regulatory changes are:

1. OPM proposes changes throughout many sections of 5 CFR part 950 to modify references associated with the use of paper-based information and processes such that these new terms apply within an electronic CFC environment. Examples include the replacement of the term ''brochure'' with ''charity list'', ''pledge card'' with ''pledge form'' and ''campaign materials'' with ''campaign information.''

2. 5 CFR 950.102(a) limits the solicitation of donors to a six week period between September 1 and December 15. OPM proposes to eliminate the restriction on the six week period and allow local campaign leadership to determine the length of the solicitation that may occur between September 1 and December 15.

3. 5 CFR 950.102(c) states that the Director exercises general supervision over all operations of the CFC, and takes all necessary steps to ensure the achievement of campaign objectives. OPM proposes to clarify and specifically articulate its authority to perform audits and investigations of all CFC activities and stakeholders and resolve any identified issues resulting from these audits and investigations.

4. 5 CFR 950.103(f) describes a six week period for soliciting donors similar to that described in item (2) above. Corresponding changes are proposed.

5. 5 CFR 950.103(g) defines the types of personnel that can be solicited and contribute to the CFC. The regulation states that contractor personnel, credit union employees and other persons employed on Federal premises, as well as retired Federal employees can contribute, but may not be solicited. This has led to much confusion about how to approach, but not solicit, these non-Federal employees working on Federal premises and retirees. The change proposed removes the restriction that these non-Federal employees not be solicited, but maintains that they be present on Federal premises to contribute to the CFC.

6. 5 CFR 950.103(h) states that a Federal employee may participate in a particular CFC only if that employee's official duty station is located within the geographic boundaries of that CFC. OPM proposes to allow for contributions to organizations outside of an employee's official duty station in the cases of emergencies and disasters as defined in 5 CFR 950.102(a) upon approval by OPM's Director. OPM proposes to remove geographic restrictions on giving completely upon implementation of appropriate technology. Because OPM anticipates elimination of these geographic restrictions on giving, local eligibility based on adjacency and statewide presence will no longer be necessary and are eliminated commencing with implementation of electronic technology that removes geographic restrictions on giving as announced by the Director. Also see changes proposed to § 950.204(b)(1).

7. 5 CFR 950.104(b)(6) encourages local Federal agencies to appoint loaned executives to assist in the campaign and grant administrative leave to all loaned executives appointed. OPM proposes to correct this error and clarify that Federal agencies should not place loaned executives on administrative leave since

the CFC activities are to be considered part of the official duties of the Federal employee loaned to assist in the CFC.

8. 5 CFR 950.104(c) states that the LFCC must annually solicit applications for the PCFO via public notice. OPM proposes to remove the requirement for an annual application and allow LFCC's to enter into multi-year agreements, at their discretion. OPM also proposes the removal of the requirement to solicit the PCFO applications via a public notice and provide the LFCC discretion as to how to announce the solicitation as long as it reaches the audience of prospective applicants.

9. 5 CFR 950.106(a) states the amount a PCFO may recover for campaign expenses shall not exceed 10 percent of the estimated budget. OPM proposes to correct the error in this subsection, which should refer to 110 percent of the estimated budget.

10. 5 CFR 950.109 describes certain conflicts of interest for Federal employees who serve as a LFCC member or fundraising coordinator. OPM proposes to add to the description a noted instance addressed via CFC Memorandum 2002–15.[1]

11. 5 CFR 950.201(a)(1) and (2) discuss eligibility for national organizations to be included on a national list. OPM proposes adding references for international organizations, which must also meet these criteria and clarifying the Director's ability to consider corrective action regarding any prior violation of regulation or directive, sanction, or penalty, as appropriate, prior to determining eligibility.

12. 5 CFR 950.204(b)(1) is modified to eliminate adjacency and statewide presence eligibility requirements commencing with the implementation of electronic technology that removes geographic restrictions on giving as announced by the Director. Also see changes proposed to § 950.103(h). In addition, OPM clarifies this subsection to define an adjacent local campaign.

13. 5 CFR 950.204(b)(2)(iii) is a newly proposed regulation that may recognize financial relationships between national organizations and their bona fide local affiliates depending on how they are structured. The proposed regulation considers two types of structures for the national and local affiliated organization relationships. The first is when there is a relationship between the national organization and local affiliate based on an IRS group tax-exemption determination. The second considers a relationship between a national organization and local affiliate when there is not an IRS group tax-exemption determination. Under both scenarios, the proposed regulation removes the requirement for the local affiliate to maintain its own audited financial statements, provided its financial activities are included in the national organization's audited financial statements. If a local affiliate is covered by an IRS group tax-exempt determination, the local affiliate may additionally rely on an IRS Form 990 group return filed by the national organization on its behalf and submit a pro forma IRS Form 990, page 1, prepared for the local affiliate with its own information. The pro forma 990 is used by OPM to calculate an administrative and fundraising rate.

14. OPM proposes adding a subsection 5 CFR 950.204(g) that clarifies the LFCC's ability to consider corrective action regarding any prior violation of regulation or directive, sanction, or penalty, as appropriate, prior to determining eligibility of local organizations.

15. 5 CFR 950.301(a) states that the Director may recognize national and international federations that conform to eligibility and accountability standards. OPM proposes clarifying the Director's ability to consider corrective action regarding any prior violation of regulation or directive, sanction, or penalty, as appropriate, prior to determining eligibility of national and international federations.

16. 5 CFR 950.301(c) states that an organization may apply for inclusion as a national federation to participate in the CFC if the applicant has 15 or more member charitable organizations that meet the eligibility criteria of §§ 950.202 and 950.203. A national federation must provide copies of applications for all of its members in the initial year that it applies as a federation, but only at OPM's request after the initial year. OPM proposes to add clarifying language that the federation, itself, does not count among the 15 or more members required to receive federation status. OPM proposes to instruct federations to provide OPM with applications for any former or new member organizations that were not CFC participating members of that federation in the previous year's campaign.

17. 5 CFR 950.301(d) discusses the role of national and international federations. OPM will make a terminology change to conform to a terminology change proposed in 5 CFR 950.603(a).

18. 5 CFR 950.301(e)(2) requires national and international federations to certify that their financial activities conform to GAAP and that they are annually audited by an independent certified public accountant in accordance with GAAS. It further requires a copy of the audit and that the audit must verify that the federation is honoring designations made to each member organization. Finally, the current regulation waives the audit requirement for newly created federations operating for less than a year. OPM proposes to clarify and simplify the language such that it applies all eligibility requirements and public accountability standards, contained in 5 CFR 950.202 and 950.203 and required of independent organizations and federation members, to the national and international federations. OPM does not view this as a substantive change.

19. 5 CFR 950.301(e)(2)(iii) requires national and international federations to disclose important administrative expense information to the CFC and donors in its annual report.

20. 5 CFR 950.303(a) states that the LFCC must approve local federations that conform to eligibility and public accountability standards. OPM proposes to clarify the LFCC's ability to consider corrective action regarding any prior violation of regulation or directive, sanction, or penalty, as appropriate, prior to determining eligibility of local federations.

21. 5 CFR 950.303(c) is the same requirement for local federations as that described in item 16 above for 5 CFR 950.301(c). The changes described for the national and international federations also are proposed for local federations.

22. 5 CFR 950.303(d) discusses the role of local federations. OPM will make a terminology change to conform to a terminology change proposed in 5 CFR 950.603(a).

23. 5 CFR 950.303(e)(2) is the same requirement for local federations as that described in item 18 above for 5 CFR 950.301(e)(2). The changes described for the national and international federations also are proposed for local federations.

24. 5 CFR 950.303(e)(2)(iii) is the same requirement for local federations as that described in item 19 above for 5 CFR 950.301(e)(2)(iii). The changes described above for national and international federations also are proposed for local federations.

25. 5 CFR 950.401(g)(3) states that each national and international federation and charitable organization will be assigned a code number by OPM and each local federation and local charitable organization will be assigned

[1] OPM issues policy and administrative guidance to campaigns through numbered memoranda.

code numbers by the LFCC. OPM proposes to modify this regulation to facilitate alternative mechanisms by which OPM may assign charity codes.

26. 5 CFR 950.601 provides a process for authorizing the release of donor names and addresses and for the transmittal of this information to charities to which the donors designated. OPM proposes changing the terms ''names and address'' to ''information.'' This change enables OPM to allow other donor information to be released, such as contribution amount and home email address. Donors have indicated that they would like the option to release additional information such as the amount contributed to charities, along with their names and addresses. OPM looks forward to comments on this proposed change to assure itself that we are changing the regulation in a manner consistent with Federal donor views.

27. 5 CFR 950.604 specifies that federations, PCFO's and other participants shall retain documents pertinent to the campaign for three campaign years. OPM proposes to clarify that three campaign years is actually three completed campaign periods and is not based on calendar years.

28. 5 CFR 950.801(a)(1) specifies that during a 30 calendar day period between January and March, as determined by the Director, OPM will accept applications from organizations seeking to be listed on the national and international list. OPM proposes to modify this section to remove the defined period of a 30-calendar day period between January and March and replace it with a period determined by the Director. OPM will create, maintain, and issue a calendar of events each year to define the applicable period. Initially, OPM will provide for a specific 60-calendar day period between December and February as the period during which OPM will accept applications.

29. 5 CFR 950.801(a)(2) states that within 35 calendar days of the closing of the receipt of applications, the Director will notify each national and international applicant of the results of the application review. OPM proposes to remove the defined 35 day requirement and will publish an anticipated date for notification on the calendar of events that OPM will maintain.

30. 5 CFR 950.801(a)(3) states that the LFCC must select the PCFO no later than March 15. OPM proposes to remove the reference to March 15 and state that the LFCC must select the PCFO no later than a date to be determined by OPM. OPM will provide the date in its calendar of events and initially set the date as February 15 to allow campaigns to begin early planning for the upcoming campaign.

31. 5 CFR 950.801(a)(4) requires the Director to issue a national and international list of eligible organizations by June 30. OPM proposes to remove the specific date and state by a date determined by the Director.

32. 5 CFR 950.801(b) requires the Director to annually issue a timetable for accepting and processing national and international applications. OPM proposes to modify this section to specify that the Director will create, maintain and issue a calendar of events with specific dates that include the accepting and processing of national and international applications as well as other significant CFC dates.

33. 5 CFR 950.901(f)(1) requires the remittance check sent by payroll offices to the PCFO each pay period to be accompanied by a statement identifying the agency, the dates of the pay period and the total number of employee deductions. OPM proposes to add the pay period number to the information required to be on this statement. PCFOs often have trouble determining when they have received the complete number (12 or 26 pay periods) of employee deductions from payroll offices. Adding the pay period number will assist PCFOs with this determination.

34. 5 CFR 950.901(i)(1) and (i)(2) each contain dates for the PCFO to notify charitable organizations of the amount of pledged contributions (no later than February 15) and to begin its periodic distributions to charitable organizations. OPM proposes to remove the specific dates referenced in the regulation and state that these actions will occur no later than a date determined by OPM. OPM will publish the dates in its calendar of events. Initially, OPM will extend the notification date to March 15. OPM proposes to remove the requirement for monthly payments and allow all campaigns to make quarterly payments beginning no later than April 1.

35. 5 CFR 950.105(e), 950.302(c), 950.302(d), 950.304(c), 950.304(d), 950.403, and 950.603 all provide for certain penalties and sanctions for federations, unaffiliated organizations, and PCFOs. OPM proposes to clarify and combine these penalties and sanctions into 5 CFR 950.603 and remove the other references from the regulations.

In an effort to develop eligibility and public accountability standards and administrative processes that serve both the public interests and meets the needs of the stakeholder community, including CFC charitable organization applicants and Federal donors, comments are now being solicited for consideration prior to the 2007 CFC and subsequent Campaigns.

Comments are invited on what issues, if any, are presented by the approach proposed by OPM for the 2007 and subsequent campaigns in light of the current CFC eligibility and public accountability standards in 5 CFR 950.201, 950.202, 950.203, 950.204, 950.301 and 950.303 and other current administrative terms and processes discussed throughout 5 CFR part 950. Comments on proposed regulatory changes that affect the potential use of donor information, such as that in section 950.203(a)(6), and the expansion of donor information to include home email address, such as in 950.601, especially are encouraged. OPM also seeks comments from charitable organizations participating in the Combined Federal Campaign as well as from Federal donors. It is noted that some CFC application and reporting forms may need to be revised as a result of these proposed regulatory changes. Any such changes will be publicly announced prior to an applicant charity's need to use such forms.

Waiver of 60-Day Comment Period for Proposed Rulemaking

Pursuant to 5 U.S.C. 553(b)(3)(B), I find that good cause exists to waive the 60-day comment period for general notice of proposed rulemaking. Limiting the comment period for the proposed regulations to 45 days will enable OPM to issue final regulations in 2006, sufficiently in advance of the 2007 CFC to enable charitable organizations and the Government to benefit from the streamlined eligibility and public accountability requirements for purposes of the 2007 CFC. A longer comment period may result in significant additional costs to the Government as well as for national and international organizations and federations, caused by potential confusion over what regulations are in effect during the earliest stage at which charities begin to put together their CFC applications. While the CFC begins in the fall of the campaign year, charities, especially those that apply through a federation, begin the application process late in the year preceding the campaign. Any confusion over which CFC regulations are in effect at the time organizations are preparing their applications for the CFC could result in frustration with the application process as well as denials of applications, appeals, potential litigation, and bad will toward the CFC itself.

Regulatory Flexibility Act

I certify that this regulation will not have a significant economic impact on a substantial number of small entities. Charitable organizations applying to the CFC have an existing, independent obligation to comply with the eligibility and public accountability standards contained in current CFC regulations. Streamlining these standards will be less burdensome.

Executive Order 12866, Regulatory Review

This rule has been reviewed by the Office of Management and Budget in accordance with Executive Order 12866.

List of Subjects in 5 CFR part 950

Administrative practice and procedures, Charitable contributions, Government employees, Military personnel, Nonprofit organizations and Reporting and recordkeeping requirements.

U.S. Office of Personnel Management.

Linda M. Springer,

Director.

Accordingly, OPM is proposing to amend 5 CFR part 950 as follows:

PART 950—SOLICITATION OF FEDERAL CIVILIAN AND UNIFORMED SERVICE PERSONNEL FOR CONTRIBUTIONS TO PRIVATE VOLUNTARY ORGANIZATIONS

1. The authority citation for part 950 continues to read as follows:

Authority: E.O. 12353 (March 23, 1982), 47 FR 12785 (March 25, 1982), 3 CFR, 1982 Comp., p. 139. E.O. 12404 (February 10, 1983), 48 FR 6685 (February 15, 1983), Pub. L. 100–202, and Pub. L. 102–393 (5 U.S.C. 1101 Note).

2. Amend part 950 as follows:

a. Remove the words ''brochure'' and ''brochures'' and add in their place ''Charity List'' and ''Charity Lists'', respectively, wherever they appear;

b. Remove the words ''card'' and ''cards'' and add in their place ''form'' and ''forms'', respectively, wherever they appear; and

c. Remove the words ''materials'', ''pamphlet'', and ''pamphlets'' and add in their place ''information'' wherever they appear.

3. In § 950.101 remove the definition of *Campaign Year* and add the definitions of *Campaign Period, Charity List,* and *Independent Organization* in alphabetical order and in the definition of *International General Designation Option* remove the word ''campaign'' to read as follows:

§ 950.101 Definitions.

* * * * *

Campaign Period means generally a 24 month period beginning with the selection of the Principal Combined Fund Organizations (PCFO) or renewal of the PCFO's agreement and ending with final disbursements to charitable organizations.

* * * * *

Charity List means the official list of charities approved by OPM for inclusion in the CFC within a given geographic solicitation area.

* * * * *

Independent Organization means a charitable organization that is not a member of a Federation for the purposes of the Combined Federal Campaign.

* * * * *

4. In § 950.102 amend paragraph (a) by removing the text ''6 week'' from the second sentence, and amend paragraph (c) by adding two sentences at the end of the paragraph to read as follows:

§ 950.102 Scope of the Combined Federal Campaign.

* * * * *

(c) * * * OPM has the authority to audit, investigate, and report on the administration of any campaign, the organization that administers the campaign, and any national, international and local federation, federation member or independent organization that participates in the campaign for compliance with these regulations. The Director resolves any issues reported and determines sanctions or penalties, as warranted under § 950.603.

5. In § 950.103, revise paragraphs (f), (g) and (h) to read as follows:

§ 950.103 Establishing a local campaign.

* * * * *

(f) Each year the LFCC must establish the time period to solicit employees. The solicitation may not begin before September 1 and in no event will it extend beyond December 15 of each year.

(g) Current Federal civilian and active duty military employees may be solicited for contributions using payroll deduction, checks, money orders, or cash, or by electronic means, including credit cards, as approved by the Director. Contractor personnel, credit union employees and other persons present on Federal premises, as well as retired Federal employees, may make single contributions to the CFC through checks, money orders, or cash, or by electronic means, including credit cards, as approved by the Director.

(h) A Federal employee whose official duty station is outside the geographic boundaries of an established CFC may not be solicited in that CFC. A Federal employee may participate in a particular CFC only if that employee's official duty station is located within the geographic boundaries of that CFC. This restriction is discontinued upon implementation of electronic technology that removes geographic restrictions on giving as announced by the Director. At the discretion of the Director, and upon showing of extraordinary circumstances, Federal employees may contribute in support of victims in cases of emergencies and disasters defined in § 950.102(a) outside the geographic boundaries of their participating CFC. Such contributions can be check, money order, or cash or by electronic means, including credit cards, as approved by the Director, but shall not be made through payroll deduction.

6. Amend § 950.104 as follows:

a. In paragraphs (b)(4) and (b)(5), remove the word ''local''; and

b. Revise paragraphs (b)(6) and (c) to read as follows:

The amendments to § 950.104 read as follows:

§ 950.104 Local Federal Coordinating Committee responsibilities.

* * * * *

(b) * * *

(6) Encouraging local Federal agencies to appoint loaned executives to assist in the campaign. CFC loaned executives' time should be charged to regular working hours. It is not appropriate to place a CFC loaned executive on administrative leave, leave without pay, or annual leave. Federal loaned executives are prohibited from working on non-CFC fundraising activities during duty hours.

* * * * *

(c) The LFCC must select a PCFO to act as its fiscal agent and campaign coordinator on the basis of presentations made to the local committee as described in § 950.105(c). The LFCC may, at its discretion select a PCFO for up to three campaign periods, subject to renewal each year following a review of performance as defined in § 950.105. The LFCC must consider the capacity of the organization to perform an efficient and effective campaign and its history of public accountability, use of funds, truthfulness and accuracy in solicitations, and sound governance and fiscal management practices as the primary factors in selecting a PCFO. The LFCC must solicit applications on a competitive basis for the PCFO no later than a date to be determined by OPM and, if it exercises discretion to enter into a multi-year arrangement, upon completion of the multi-year term. The LFCC shall solicit applications via outreach activities including: Public

notice in newspapers, postings on Web sites, advertising in trade journals, dissemination among participating CFC organizations and federations, and/or outreach through local or state nonprofit associations and training centers, among others. The PCFO application period must be open a minimum of 21 calendar days. Costs incurred for soliciting applications must be added to the PCFO budget as an administrative cost.

§ 950.105 [Amended]

7. Amend § 950.105 as follows:

a. In paragraph (b), remove the word ''printed'' in the second sentence and add in its place the word ''developed'';

b. In paragraph (d)(3), remove the word ''address'' and add in its place ''contact information'';

c. In paragraph (d)(6), add a comma and the text ''contact information and contribution amounts'' after the word ''names'';

d. In paragraph (d)(10), remove the word ''reprinting'' and add in its place ''reproduction and/or reissuing'' and remove the number ''10'' and add in its place ''110''; and

e. Remove paragraph (e).

§ 950.106 [Amended]

8. In § 950.106, amend paragraph (a) by removing the number ''10'' and adding in its place ''110.''

§ 950.109 [Amended]

9. In § 950.109, amend the first sentence by adding the text ''serve in any official capacity in any organization that serves as the PCFO of the local CFC, or'' before the word ''participate''.

10. Amend § 950.201 as follows:

a. Revise the section heading;

b. In paragraph (a)(1), add the text ''and international'' after the word ''national''; and

c. Revise paragraphs (a)(2) through (b) to read as follows:

§ 950.201 National and International list eligibility.

(a) * * *

(2) Determine which organizations among those that apply qualify to be part of the national and international lists and then provide these lists of qualified organizations to all local campaigns. In order to determine whether an organization may participate in the campaign, the Director may request evidence of corrective action regarding any prior violation of regulation or directive, sanction, or penalty, as appropriate. The Director retains the ultimate authority to decide whether the organization has demonstrated, to the Director's satisfaction, that the organization has taken appropriate corrective action. Failure to demonstrate satisfactory corrective action or to respond to the Director's request for information within 10 calendar days of the date of the request may result in a determination that the organization will not be included in the national and international list.

(b) These lists of national and international charities shall be included in all local Charity Lists in accordance with these regulations. These lists will include each organization's CFC code. These CFC codes must be faithfully reproduced in the local Charity Lists.

* * * * *

11. Revise § 950.202 to read as follows:

§ 950.202 National and International list eligibility requirements.

(a) Certify that it provides or conducts real services, benefits, assistance, or program activities, in 15 or more different states or a foreign country over the 3 year period immediately preceding the start of the year involved. This requirement cannot be met on the sole basis of services provided through an ''800'' telephone number or by disseminating information and publications via the U.S. Postal Service, the Internet, or a combination thereof. A schedule listing a detailed description of the services in each state (minimum 15) or foreign countries (minimum 1), including the year of service, must be included with the application. The schedule must make a clear showing of national or international presence. Broad descriptions of services and identical repetitive narratives will be disregarded at the discretion of OPM if they do not allow OPM to adequately determine that real services were provided or to accurately determine the individuals or entities who benefited. Providing listings of affiliated groups does not sufficiently demonstrate provision of real services by the applicant. Location of residence of organization members or location of residence of visitors to a facility does not substantiate provision of services in the location of residence. However, organizations that issue student scholarships or fellowships must indicate the state in which the recipient resides, not the state of the school or place of fellowship. Mere dissemination of information does not demonstrate provision of real services. While it is not expected that an organization maintain an office in each state or foreign country, a clear showing must be made of the actual services, benefits, assistance or activities provided in each state or foreign country. De minimus services, benefits, assistance, or other program activities in any State or foreign country will not be accepted as a basis for qualification as a national or international organization.

(b) Certify that it is an organization recognized by the Internal Revenue Service as tax exempt under 26 U.S.C. 501(c)(3) to which contributions are deductible under 26 U.S.C. 170(c)(2) and that the organization is further classified as a public charity under 26 U.S.C. 509(a). A copy of the letter(s) from the Internal Revenue Service granting tax exempt and public charity status must be included in the organization's application.

12. Amend § 950.203 as follows:

a. Remove paragraphs (a)(6), (a)(7), (a)(9) through (a)(11), and (a)(13) and redesignate paragraph (a)(8) as (a)(6) and paragraph (a)(12) as (a)(7), respectively;

b. In paragraph (a), add the text ''or international'' after the word ''national'' in the first sentence;

c. In paragraph (a)(1), remove the second sentence;

d. Revise paragraphs (a)(2) through (a)(4) ;

e. In the newly redesignated paragraph (a)(7), add the text ''or international'' after the word ''national''.

The amendments to § 950.203 read as follows:

§ 950.203 Public accountability standards.

(a) * * *

(2) Certify that the organization:

(i)(A) Indicates total revenue of $250,000 or more on its most recent IRS Form 990 or pro forma IRS Form 990 submitted to the CFC, if it is not required by the IRS to file an IRS Form 990, covering a period not more than 18 months prior to the January of the campaign year to which the organization is applying;

(B) Accounts for its funds on an accrual basis (cash, modified cash, modified accrual and any other methods of accounting are not acceptable) in accordance with generally accepted accounting principles; and

(C) Has an audit of its fiscal operations completed annually by an independent certified public accountant in accordance with generally accepted auditing standards; or

(ii)(A) Reports total revenue of less than $250,000 on its most recent IRS Form 990 covering a period not more than 18 months prior to the January of the campaign year to which the organization is applying; and

(B)Has controls in place to insure funds are properly accounted for and that it can provide accurate timely financial information to interested parties.

(3) Certify that it prepares and submits to the IRS a complete copy of

the organization's IRS Form 990 or that it is not required to prepare and submit an IRS Form 990 to the IRS. Provide a completed copy of the organization's most recent IRS Form 990 submitted to the IRS, including signature, supplemental statements and Schedule A, with the application, or if not required to file an IRS Form 990, provide a pro forma IRS Form 990 page 1 only. IRS Forms 990EZ, 990PF, and comparable forms are not acceptable substitutes.

(4) Provide a computation of the organization's percentage of total support and revenue spent on administrative and fundraising. This percentage shall be computed from information on the IRS Form 990 submitted pursuant to § 950.203(a)(3).

* * * * *

13. Amend § 950.204 as follows:

a. In paragraphs (a) and (b), remove the word ''local'';

b. Revise paragraph (b)(1);

c. Remove paragraph (b)(2)(ii) and redesignate paragraph (b)(2)(iii) as (b)(2)(ii);

d. Add new paragraphs (b)(2)(iii) and (b)(2)(iv);

e. In paragraph (f), remove the word ''print'' from the first sentence and add in its place ''produce'' and remove the word ''campaign'' from the first sentence; and

f. Add new paragraph (g).

The amendments to § 950.204 read as follows:

§ 950.204 Local list eligibility.

* * * * *

(b) * * *

(1) An organization must demonstrate to the satisfaction of the LFCC, that it has a substantial local presence in the geographical area covered by the local campaign, a substantial local presence in the geographical area covered by an adjacent local campaign, or substantial statewide presence. Eligibility to participate in an adjoining campaign on the basis of adjacency or statewide presence is discontinued upon implementation of electronic technology that removes geographic restrictions on giving as announced by the Director.

(i) Substantial local presence is defined as a staffed facility, office or portion of a residence dedicated exclusively to that organization, available to members of the public seeking its services or benefits. The facility must be open at least 15 hours a week and have a telephone dedicated exclusively to the organization. The office may be staffed by volunteers. Substantial local presence cannot be met on the basis of services provided solely through an ''800'' telephone number or the U.S. Postal Service or a combination thereof.

(ii) An adjacent local campaign is defined as a local campaign whose geographic border touches the geographic border of another local campaign. Participation in a local campaign via an adjacency determination does not grant the organization a substantial local presence in the adjacent local campaign and participating via adjacency cannot be used to establish adjacency to local campaigns bordering the adjacent campaign area. In addition, an organization must first be determined eligible to participate in the local campaign area where it has a substantial local presence before it may be determined eligible to participate in an adjacent local campaign. An organization cannot otherwise qualify as an eligible organization in an adjacent local campaign.

(iii) Substantial statewide presence is defined as providing or conducting real services, benefits, assistance or program activities over the 3 year period immediately preceding the start of the application year covering 30 percent of a state's geographic boundaries or providing or conducting real services, benefits, assistance or program activities affecting 30 percent of a state's population. Substantial statewide presence cannot be met on the basis of services provided solely through an ''800'' telephone number or the U.S. Postal Service or a combination thereof. This subsection is eliminated upon implementation of electronic technology that removes geographic restrictions on giving as announced by the Director.

* * * * *

(2) * * *

(iii) A local charitable organization covered by a 26 U.S.C. 501(c)(3) group exemption that can demonstrate it provides services as a separately incorporated local bona fide chapter or affiliate in good standing of a national tax-exempt organization under 26 U.S.C. 501(c)(3) does not need to maintain its own independent IRS determination letter, audited financial statements and IRS Form 990 for CFC purposes. These local charitable organizations must provide a certification signed by either the Chief Executive Officer (CEO) or CEO equivalent of the national organization stating that the local charitable organization is covered under the national organization's tax-exempt status and financial accountability and reporting controls, and that the local organization's financial activities are included in the national organization's audited financial statements. The local charitable organization must provide a copy of the national organization's IRS group tax-exemption determination, including the most recent IRS approval of subordinates covered by the group exemption, a copy of the IRS letter assigning the local charitable organization an Employer Identification Number (EIN) and a copy of its IRS Form 990 filed with the IRS. If the organization is covered by a group return on IRS Form 990 filed by the national organization, the local organization must provide a copy of the complete group return on IRS Form 990 along with a pro forma IRS Form 990 (page 1) prepared for the local charitable organization for CFC purposes only. In either case, the IRS Form 990 must cover a period ending not more than 18 months prior to the January of the campaign year to which the organization is applying. The local charitable organization must certify and demonstrate that it independently meets all other applicable local eligibility requirements and public accountability standards included in §§ 950.204(b)(1) and 950.204(b)(2).

(iv) A local charitable organization that can demonstrate it provides services as a separately incorporated local bona fide chapter or affiliate in good standing of a national tax-exempt organization under 26 U.S.C. 501(c)(3), but is not covered by a 26 U.S.C. 501(c)(3) group exemption does not need to maintain its own independent audited financial statements for CFC purposes. These local charitable organizations must provide a certification signed by either the Chief Executive Officer (CEO) or CEO equivalent of the national organization stating that the local charitable organization operates as a bona-fide chapter or affiliate in good standing of the national organization and is subject to the financial accountability and reporting controls of the national organization, and that the local organization's financial activities are included in the national organization's audited financial statements. Upon certification, the local organization must provide a copy of an IRS tax-exemption determination letter that includes appropriate taxpayer identification information obtained from the IRS and a completed copy of its Form 990 filed with the IRS. The local charitable organization must certify and demonstrate that it independently meets all other applicable local eligibility requirements and public accountability standards included in §§ 950.204(b)(1) and 950.204(b)(2).

* * * * *

(g) In order to determine whether an organization may participate in the campaign, the LFCC may request evidence of corrective action regarding any prior violation of regulation or directive, sanction, or penalty, as appropriate. The LFCC will decide whether the organization has demonstrated, to the LFCC's satisfaction, that the organization has taken appropriate corrective action. Failure to demonstrate satisfactory corrective action or to respond to the LFCC's request for information within 10 calendar days of the date of the request may result in a determination that the organization will not be included in the local list.

§ 950.205 [Amended]

14. In § 950.205, amend paragraph (c)(4) by removing the word ''and'' and adding to the end of the sentence the text ''and supporting information to justify the reversal of the original decision.''

15. Amend § 950.301 as follows:

a. Revise the section heading and paragraph (a);

b. Revise paragraph (c);

c. In paragraph (d), remove the word ''decertification'' in the last sentence and add in its place the text ''withdrawal of federation status''; and

d. Revise paragraph (e)(2).

The amendments to § 950.301 read as follows:

§ 950.301 National and International federations eligibility.

(a) The Director may recognize national and international federations that conform to the requirements and are eligible to receive designations. The Director may from time to time place a moratorium on the recognition of national and international federations. In order to determine whether the Director will recognize a national or international federation, the Director may request evidence of corrective action regarding any prior violation of regulation or directive, sanction, or penalty, as appropriate. The Director retains the ultimate authority to decide whether the federation has demonstrated, to the Director's satisfaction, that the federation has taken appropriate corrective action. Failure to demonstrate satisfactory corrective action or to respond to the Director's request for information within 10 calendar days of the date of the request may result in a determination that the federation will not be included in the national and international list.

* * * * *

(c) An organization may apply to the Director for inclusion as a national or international federation to participate in the CFC if the applicant has, as members of the proposed federation, 15 or more charitable organizations, in addition to the federation itself, that meet the eligibility criteria of §§ 950.202 and 950.203. The initial year an organization applies for federation status, it must submit the applications of all its proposed member organizations in addition to the federation application. Federations must re-establish eligibility each year, however only the applications of its new and former members that were not within their federation, as a CFC participant, in the previous year's campaign need accompany the annual federation application once an organization has obtained federation status, unless additional member applications are requested by the Director.

* * * * *

(e) * * *

(2) That it meets the eligibility requirements and public accountability standards contained in §§ 950.202 and 950.203. The federation can demonstrate that it has met the eligibility requirement in § 950.202(a) either through its own services, benefits, assistance or program activities or through its 15 members' activities.

(i) The federation must complete the certification set forth at § 950.203(a)(2) without regard to the amount of revenue reported on its IRS Form 990 and must provide a copy of its audited financial statements. The audited financial statements provided must verify that the federation is honoring designations made to each member organization by distributing a proportionate share of receipts based on donor designations to each member. The audit requirement is waived for newly created federations operating for less than a year as determined from the date of its IRS tax-exemption letter to the closing date of the CFC application period.

(ii) The federation must provide a listing of its board of directors, beginning and ending dates of each member's term of office, and the board's meeting dates and locations for the previous year.

(iii) The federation must certify that it prepares and makes available to the public, upon request, an annual report that includes a full description of the organization's activities and supporting services and identifies its directors and chief administrative personnel. The federation must provide a copy of its most recently completed annual report covering the fiscal year ending not more than 18 months prior to January of the campaign year to which the federation is applying or the preceding calendar year. The annual report must also include an accurate description of the federation's membership dues and/or service charges received by the federation from the charitable organizations participating as members. The information must clearly present the amounts raised, the sources of contributions, the cost of fundraising, and how costs are recovered from donations.

* * * * *

16. In § 950.302, revise the section heading, remove paragraphs (c) through (e), and add a new paragraph (c) to read as follows:

§ 950.302 Responsibilities of national and international federations.

* * * * *

(c) Each federation, as fiscal agent for its member organizations, must ensure that Federal employee designations are honored in that each member organization receives its proportionate share of receipts based on the results of each individual campaign. The proportionate share of receipts is determined by donor designations to the individual member as compared to total campaign designations.

17. Amend § 950.303 as follows:

a. Revise paragraph (a);

b. Revise paragraph (c);

c. In paragraph (d), remove the word ''decertification'' in the last sentence and add in its place the text ''withdrawal of federation status''; and

d. Revise paragraph (e)(2).

The amendments to § 950.303 read as follows:

§ 950.303 Local federations' eligibility.

(a) LFCC's must approve local federations that meet the applicable requirements, except that in order to determine whether the LFCC must recognize a local federation, the LFCC may request evidence of corrective action regarding any prior violation of regulation or directive, sanction, or penalty, as appropriate. A local federation that has been notified that it will not be included on the local list because of failure to correct a prior violation may appeal the LFCC's decision to the Director in accordance with § 950.205(b). The Director retains the ultimate authority to decide whether the local federation has demonstrated, to the Director's satisfaction, that the local federation has taken appropriate corrective action. Failure to demonstrate satisfactory corrective action or to respond to a request by the LFCC or Director for information within 10 calendar days of the date of the request

may result in a determination that the local federation will not be included in the local list.

* * * * *

(c) An organization may apply to the LFCC for inclusion as a local federation to participate in the CFC if the applicant has as members of the proposed federation 15 or more charitable organizations, in addition to the federation itself, that meet the eligibility criteria of §§ 950.202, 950.203 and 950.204. The initial year an organization applies for federation status, it must submit to the LFCC applications of all its proposed member organizations in addition to the federation application. Federations must re-establish eligibility each year, however only the applications of its new and former members that were not within their federation, as a CFC participant, in the previous year's campaign need accompany the annual federation application once an organization has obtained federation status, unless additional member applications are requested by the LFCC.

* * * * *

(e) * * *

(2) That it meets the eligibility requirements contained in § 950.204 (including eligibility requirements and public accountability standards of §§ 950.202 and 950.203 that are incorporated by reference). The federation can demonstrate that it has met the eligibility requirement in § 950.204(b)(1) either through its own services, benefits, assistance or program activities or through its 15 members' activities.

(i) The federation must complete the certification set forth at § 950.203(a)(2) without regard to the amount of revenue reported on its IRS Form 990 and must provide a copy of its audited financial statements. The audited financial statements provided must verify that the federation is honoring designations made to each member organization by distributing a proportionate share of receipts based on donor designations to each member. The audit requirement is waived for newly created federations operating for less than a year as determined from the date of its IRS tax-exemption letter to the closing date of the CFC application period.

(ii) The federation must provide a listing of its board of directors, beginning and ending dates of each member's term of office, and the board's meeting dates and locations for the previous year.

(iii) The federation must certify that it prepares and makes available to the public, upon request, an annual report that includes a full description of the organization's activities and supporting services and identifies its directors and chief administrative personnel. The federation must provide a copy of its most recently completed annual report covering the fiscal year ending not more than 18 months prior to January of the campaign year to which the federation is applying or the preceding calendar year. The annual report must also include an accurate description of the federation's membership dues and/or service charges received by the federation from the charitable organizations participating as members. The information must clearly present the amounts raised, the sources of contributions, the cost of fundraising, and how costs are recovered from donations.

* * * * *

18. In § 950.304, remove paragraphs (c) through (e), and add a new paragraph (c) to read as follows:

§ 950.304 Responsibilities of local federations.

* * * * *

(c) Each federation, as fiscal agent for its member organizations, must ensure that Federal employee designations are honored in that each member organization receives its proportionate share of receipts based on the results of each individual campaign. The proportionate share of receipts is determined by donor designations to the individual member as compared to total campaign designations.

19. Amend § 950.401 as follows:

a. In paragraph (a), remove the word ''printed'' in the second sentence and add in its place ''developed'';

b. In the first sentence of paragraph (e), add the text ''source of'' after the word ''official'', remove the word ''package'', and add the text ''either in hard copy or electronic format'' after the word ''available'';

c. In paragraph (f), remove the word ''package'' in the first and second sentences and add in its place ''design'';

d. Revise the introductory paragraph of (g)(1);

e. Revise paragraphs (g)(2), (g)(3), and (h); and

f. In paragraph (k), remove the word ''year'' and add in its place ''period'', and add to the end of the sentence the text ''or if the campaign can demonstrate to the satisfaction of the Director that it can make the same information available electronically without disrupting donor opportunities to contribute.''

The amendments to § 950.401 read as follows:

§ 950.401 Campaign and publicity materials.

(g) * * *

(1) OPM will include in the annual distribution of the National and International Lists explicit instructions for the production of the Charity Lists and language to be reproduced verbatim in the introductory section. The general information provided will include:

* * * * *

(2) Following the introductory section, the Charity List will consist of three parts—the national, the international, and the local. The order of these three parts will be annually rotated in accordance with OPM instructions. In 1996 the Local part will be first followed by the National and finally the International. The national and international lists will consist of faithful reproductions of the lists of national and international organizations, including federations, provided by OPM. The third part, the local list, is determined by the LFCC. The order of listing of the federated and independent organizations within the three separate parts will be determined by random drawing. The order of organizations within each federation will be determined by the federation. The order within the national, international and local independent groups will be alphabetical. Absent specific instructions from OPM to the contrary, each participating organization and federated group listing must include a description, not to exceed 25 words, of their services and programs, plus a telephone number for the Federal donor to request further information about the group's services, benefits, and administrative expenses. Each listing will include the organization's administration and fundraising percentage as calculated pursuant to § 950.203(a)(4). Neither the percentage of administrative and fundraising expenses, nor the telephone number count toward the 25-word statement.

(3) Each federation and charitable organization will be assigned a code in a manner determined by the Director. At the beginning of each federated group's listing will be the federation's name, code number, 25-word statement, percentage of administrative and fundraising expenses, and telephone number. The sections of the Charity Lists where the independent organizations are listed will begin with the titles National Independent Organizations, International Independent Organizations and Local Independent Organizations respectively.

(h) Omission of an eligible charitable organization from the Charity List may

require that all Charity Lists be reproduced and reissued. Such omissions must be reported to OPM immediately upon discovery. The Director or LFCC may direct that the cost of such reproduction and reissue be borne by the PCFO or charged to CFC administrative expenses.

* * * * *

20. Amend § 950.402 as follows:

a. In paragraph (a), remove the word ''year'' and add in its place ''period'';

b. In paragraph (c), add to the end of the second sentence a comma followed by the text ''except in cases of emergencies or disasters as approved by the Director. This restriction does not apply upon implementation of electronic technology that removes the geographic restrictions on giving as announced by the Director.'' and

c. In paragraph (d), revise the last sentence.

The amendments to § 950.402 read as follows:

§ 950.402 Pledge card.

* * * * *

(d) * * * For example, if an employee indicates a total gift of $100 on the pledge form, but designates $50 to one organization and $25 to each of three other organizations, the PCFO must adjust the pledges proportionately by entering a pledge of $40 to the first organization and $20 to each of the three other organizations.

§ 950.403 [Removed]

21. Remove § 950.403.

22. Revise § 950.601 to read as follows:

§ 950.601 Release of contributor information.

(a) The pledge form, designed pursuant to § 950.402, must allow a contributor to indicate if the contributor does wish his or her name, contribution amount, and home contact information forwarded to the charitable organization or organizations designated. A PCFO's failure to honor a contributor's wish may result in the PCFO being sanctioned or penalized as provided for in § 950.603(a).

(b) The pledge form shall permit a contributor to specify which information, if any, he or she wishes released to organizations receiving his or her donations.

(c) It is the responsibility of the PCFO to forward the contributor information for those who have indicated that they wish this information released to the recipient organization directly, if the organization is independent, and to the organization's federation if the organization is a member of a federation. The PCFO may not sell or make any other use of this information.

23. In § 950.602, revise paragraph (b) to read as follows:

§ 950.602 Solicitation methods.

* * * * *

(b) Special CFC fundraising events, such as raffles, lotteries, auctions, bake sales, carnivals, athletic events, or other activities not specifically provided for in these regulations are permitted during the campaign period if approved by the appropriate agency head or government official, consistent with agency ethics regulations. CFC special fundraising events should be undertaken in the spirit of generating interest in the CFC and open without regard to whether an individual makes a contribution. Chances to win should be disassociated from amount of contributions, if any. Raffle prizes should be modest in nature and value. Examples of successful raffles have included opportunities for lunch with Agency Officials, parking spaces for a week, and holiday turkeys. Any special CFC fundraising event and prize or gift should be approved in advance by the Agency's ethics official.

* * * * *

24. In § 950.603, revise the section heading and paragraph (a) to read as follows:

§ 950.603 Sanctions and penalties.

(a)(1) The Director may impose sanctions or penalties on a federation, charitable organization or PCFO for violating these regulations, other applicable provisions of law, or any directive or instruction from the Director. The Director will determine the appropriate sanction and/or penalty, up to and including expulsion from the CFC. In determining the appropriate sanction and/or penalty, the Director will consider previous violations, harm to Federal employee confidence in the CFC, and any other relevant factors. The Director may bar a federation or charitable organization from serving as PCFO, for a period not to exceed one campaign period, if it is determined that that the federation or charitable organization has violated any provisions of these regulations. A federation, charitable organization or PCFO will be notified in writing of the Director's intent to sanction and/or penalize and will have 10 calendar days from the date of receipt of the notice to submit a written response. The Director's final decision will be communicated in writing to the federation, charitable organization, or PCFO, with a copy to the appropriate LFCC.

(2) The Director may withdraw federation status with respect to a national, international or local federation that makes a false certification or fails to comply with any directive of the Director, or to respond in a timely fashion to a request by the Director or LFCC for information or cooperation, including with respect to an investigation or in the settlement of disbursements. The LFCC may recommend the withdrawal of federation status with respect to a local federation. As stated in §§ 950.301(d) and 950.303(d), failure to meet minimum federation eligibility requirements shall not be deemed to be a withdrawal of federation status subject to a hearing on the record. Eligibility decisions shall follow the procedures in §§ 950.301(f) and 950.303(f). A federation will be notified in writing of the Director's intent to withdraw federation status for a period of up to one campaign period and will have 10 calendar days from the date of receipt of the notice to submit a written response. On receipt of the response, or in the absence of a timely response, the Director or representative shall set a date, time, and place for a hearing. The federation shall be notified at least 10 calendar days in advance of the hearing. A hearing shall be conducted by a hearing officer designated by the Director unless it is waived in writing by the federation. After the hearing is held, or after the Director's receipt of the federation's written waiver of the hearing, the Director shall make a final decision on the record, taking into consideration the recommendation submitted by the hearing officer. The Director's final decision will be communicated in writing to the federation, with a copy to the appropriate LFCC.

(3) A federation, charitable organization or PCFO sanctioned or penalized under any provision of these regulations must demonstrate to the satisfaction of the Director that it has taken corrective action to resolve the reason for sanction and/or penalty and has implemented reasonable and appropriate controls to ensure that the situation will not occur again prior to being allowed to participate in subsequent CFCs and/or serving as a PCFO for a campaign.

* * * * *

25. Revise § 950.604 to read as follows:

§ 950.604 Records retention.

Federations, PCFO's and other participants in the CFC shall retain documents pertinent to the campaign for at least three completed campaign

periods. For example, documentation regarding the 2006 campaign, which would include selection of the PCFO in March of 2006 through the final distribution of contributions in approximately March 2008, must be retained through the completion of the 2007, 2008 and 2009 campaign periods (*i.e.* until approximately March 2011). Documents requested by OPM must be made available within 10 business days of the request.

26. Amend § 950.801 as follows:

a. In paragraph (a)(1), remove the text ''one 30-day calendar day'' and add in its place the word ''a'', remove the text ''January and March'' and add in its place the text ''December and January'', and add the text ''and international'' to the last sentence after the word ''national'';

b. Revise paragraph (a)(2);

c. In paragraph (a)(3), remove the date ''March 15'' and add in its place ''a date to be determined by OPM. The date will be part of the annual timetable issued by the Director under § 950.801(b).'';

d. In paragraph (a)(4), remove the text ''June 30'' and add in its place ''a date to be determined by OPM. The date will be part of the annual timetable issued by the Director under § 950.801(b).''; and

e. In paragraph (b), add the text ''and international'' in the first sentence after the word ''national'', and add a second sentence to read as follows: ''The Director will issue the timetable for a campaign period no later than October 31 of the year preceding the campaign period.''

The amendments to § 950.801 read as follows:

§ 950.801 Campaign schedule.

(a) * * *

(2) The Director will determine a date after the closing of the receipt of applications by which the Director will issue notices to each national and international applicant organization of the results of the Director's review. The date will be part of the annual timetable issued by the Director under § 950.801(b).

* * * * *

27. Amend § 950.901 as follows:

a. In paragraph (c)(1), remove the text ''printed or purchased from a central source'' and add in its place ''reproduced'', and remove the word ''distributed'' and add in its place ''made available'';

b. In paragraph (c)(2), add the word ''paper'' after the word ''each'', and add the text ''or an acceptable electronic version'' after the word ''authorization'';

c. In paragraph (f)(1), add the text ''pay period number,'' after the word ''period,''; and

d. Revise paragraphs (i)(1) and (i)(2) .

The amendments to § 950.901 read as follows:

§ 950.901 Payroll allotment.

* * * * *

(i) * * *

(1) The PCFO shall notify the federations, national and international organizations, and local organizations as soon as practicable after the completion of the campaign, but in no case later than a date to be determined by OPM, of the amounts, if any, designated to them and their member agencies and of the amounts of the undesignated funds, if any, allocated to them. The date will be part of the annual timetable issued by the Director under § 950.801(b).

(2) The PCFO is responsible for the accuracy of disbursements it transmits to recipients. It shall transmit disbursements at least quarterly, minus the approved proportionate share for administrative cost reimbursement and the PCFO fee set forth in § 950.106. It shall remit the contributions to each organization or to the federation, if any, of which the organization is a member. The PCFO will distribute all CFC receipts beginning April 1, and quarterly thereafter. At the close of each disbursement period, the PCFO's CFC account shall have a balance of zero.

* * * * *

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DEPARTMENT OF AGRICULTURE

Agricultural Marketing Service

7 CFR Part 966

[Docket No. FVO6–966–1 PR]

Tomatoes Grown in Florida; Partial Exemption to the Minimum Grade Requirements

ACTION: Proposed rule.

SUMMARY: This rule invites comments on a proposed partial exemption to the minimum grade requirements under the marketing order for tomatoes grown in Florida (order). The Florida Tomato Committee (Committee) locally administers the order. Under the order, Florida tomatoes must meet at least a U.S. No. 2 grade before they can be shipped and sold outside the regulated area. This rule would exempt UglyRipe™ (UglyRipe) tomatoes from the shape requirements associated with the U.S. No. 2 grade. This change would increase the volume of UglyRipe tomatoes that would meet the order requirements, and would help increase shipments and availability of these tomatoes.

DATES: Comments must be received by August 28, 2006.

ADDRESSES: Interested persons are invited to submit written comments concerning this proposal. Comments must be sent to the Docket Clerk, Marketing Order Administration Branch, Fruit and Vegetable Programs, AMS, USDA, 1400 Independence Avenue SW., STOP 0237, Washington, DC 20250–0237; Fax: (202) 720–8938; E-mail: moab.docketclerk@usda.gov; or Internet: *http://www.regulations.gov*. All comments should reference the docket number and the date and page number of this issue of the **Federal Register** and will be made available for public inspection in the Office of the Docket Clerk during regular business hours, or can be viewed at: *http://www.ams.usda.gov/fv/moab.html*.

FOR FURTHER INFORMATION CONTACT: William Pimental, Southeast Marketing Field Office, Marketing Order Administration Branch, Fruit and Vegetable Programs, AMS, USDA; telephone: (863) 324–3375, Fax: (863) 325–8793, or e-mail *William.pimental@usda.gov*; or Christian Nissen, Regional Manager, Southeast Marketing Field Office, Marketing Order Administration Branch, Fruit and Vegetable Programs, AMS, USDA; telephone: (863) 324–3375, Fax: (863) 325–8793, or e-mail: *Christian.nissen@usda.gov*.

Small businesses may request information on complying with this regulation by contacting Jay Guerber, Marketing Order Administration Branch, Fruit and Vegetable Programs, AMS, USDA, 1400 Independence Avenue SW., STOP 0237, Washington, DC 20250–0237; telephone: (202) 720–2491, Fax: (202) 720–8938, or E-mail: *Jay.Guerber@usda.gov*.

SUPPLEMENTARY INFORMATION: This proposal is issued under Marketing Agreement No. 125 and Marketing Order No. 966, both as amended (7 CFR part 966), regulating the handling of tomatoes grown in certain designated counties in Florida, hereinafter referred to as the ''order.'' The marketing agreement and order are effective under the Agricultural Marketing Agreement Act of 1937, as amended (7 U.S.C. 601–674), hereinafter referred to as the ''Act.''

The Department of Agriculture (USDA) is issuing this rule in conformance with Executive Order 12866.

This proposal has been reviewed under Executive Order 12988, Civil

Justice Reform. This rule is not intended to have retroactive effect. This proposal will not preempt any State or local laws, regulations, or policies, unless they present an irreconcilable conflict with this rule.

The Act provides that administrative proceedings must be exhausted before parties may file suit in court. Under section 608c(15)(A) of the Act, any handler subject to an order may file with USDA a petition stating that the order, any provision of the order, or any obligation imposed in connection with the order is not in accordance with law and request a modification of the order or to be exempted therefrom. A handler is afforded the opportunity for a hearing on the petition. After the hearing, USDA would rule on the petition. The Act provides that the district court of the United States in any district in which the handler is an inhabitant, or has his or her principal place of business, has jurisdiction to review USDA's ruling on the petition, provided an action is filed not later than 20 days after the date of the entry of the ruling.

This rule invites comments on a proposed partial exemption to the minimum grade requirements prescribed under the order. The order's rules and regulations specify that Florida tomatoes must meet at least a U.S. No. 2 grade before they can be shipped and sold outside the regulated area. This rule would exempt UglyRipe tomatoes from the shape requirements associated with the U.S. No. 2 grade. This change would increase the volume of UglyRipe tomatoes that would meet the order requirements, and would help increase shipments and availability of these tomatoes. In addition, it is anticipated that this change would help promote continued innovation within the industry.

Section 966.52 of the order provides the authority for the establishment of grade and size requirements for Florida tomatoes. Form and shape represent part of the factors of grade. Section 966.323 of the order's rules and regulations specifies, in part, the minimum grade requirements for Florida tomatoes. The current minimum grade requirement for Florida tomatoes is a U.S. No. 2. The specifics of this grade requirement are listed under the U.S. Standards for Grades of Fresh Tomatoes (7 CFR 51.1855–51.1877).

The U.S. Standards for Grades of Fresh Tomatoes (Standards) specify the criteria tomatoes must meet to grade a U.S. No. 2, including that they must be reasonably well formed, and not more than slightly rough. These two factors relate specifically to the shape of the tomato. The definitions section of the Standards defines reasonably well formed as not decidedly kidney shaped, lopsided, elongated, angular, or otherwise decidedly deformed. The term slightly rough means that the tomato is not decidedly ridged or grooved. This rule would amend § 966.323 to exempt UglyRipe tomatoes from these shape requirements as specified under the grade for a U.S. No. 2.

UglyRipe tomatoes are a trademarked tomato variety bred to look and taste like an heirloom-type tomato. One of the characteristics of this variety is its appearance. UglyRipe tomatoes are often shaped differently from other round tomatoes. Depending on the time of year and the weather, UglyRipe tomatoes are concave on the stem end with deep, ridged shoulders. They can also appear kidney shaped and lopsided. Because of this variance in shape and appearance, UglyRipe tomatoes can have difficulty meeting the shape requirements of the U.S. No. 2 grade.

This rule would provide UglyRipe tomatoes with a partial exemption from the grade requirements under the order. UglyRipe tomatoes would only be exempt from the shape requirements of the grade and would still be required to meet all other aspects of the U.S. No. 2 grade. The UglyRipe tomato continues to be required to meet all other requirements under the marketing order, such as size, pack and container, and inspection.

Prior to the 1998–99 season, the Committee recommended that the minimum grade be increased from a U.S. No. 3 to a U.S. No. 2. Committee members agree that increasing the grade requirement has been very beneficial to the industry and in the marketing of Florida tomatoes. Further, some Committee members have stated that a large part of the volume of the standard commercial varieties of tomatoes which fail to make the grade are rejected because of their shape and appearance. Consequently, there was some industry concern that providing an exemption for the UglyRipe tomato could result in the shipment of U.S. No. 3 grade tomatoes of other varieties, contrary to the objectives of the exemption and the order.

To address this concern, the producers of UglyRipe tomatoes pursued entry into USDA's Identity Preservation (IP) program. This program was developed by the Agricultural Marketing Service to assist companies in marketing products having unique traits. The program provides independent, third-party verification of the segregation of a company's unique product at every stage, from seed, production and processing, to distribution. The UglyRipe tomato was granted positive program status in early 2006.

This partial exemption would only extend to UglyRipe tomatoes covered under the IP program. As such, this should help ensure that only UglyRipe tomatoes would be shipped under the proposed exemption. In addition, this exemption would be contingent upon the UglyRipe tomatoes continuing to meet the requirements of the IP program.

This rule would exempt UglyRipe tomatoes from the shape requirements associated with the U.S. No. 2 grade. This change would increase the volume of UglyRipe tomatoes that would meet order requirements, and would help increase shipments and availability of these tomatoes.

Section 8e of the Act provides that when certain domestically produced commodities, including tomatoes, are regulated under a Federal marketing order, imports of that commodity must meet the same or comparable grade, size, quality, and maturity requirements. Since this rule would provide a partial exemption to the minimum grade requirements under the domestic handling regulations, a corresponding change to the import regulations would also need to be accomplished. A proposed rule that would provide a similar partial exemption to the minimum grade requirements under the import regulations will be issued as a separate action.

Initial Regulatory Flexibility Analysis

Pursuant to requirements set forth in the Regulatory Flexibility Act (RFA), the Agricultural Marketing Service (AMS) has considered the economic impact of this action on small entities. Accordingly, AMS has prepared this initial regulatory flexibility analysis.

The purpose of the RFA is to fit regulatory actions to the scale of business subject to such actions in order that small businesses will not be unduly or disproportionately burdened. Marketing orders issued pursuant to the Act, and rules issued there under, are unique in that they are brought about through group action of essentially small entities acting on their own behalf. Thus, both statutes have small entity orientation and compatibility.

There are approximately 100 producers of tomatoes in the production area and approximately 70 handlers subject to regulation under the marketing order. Small agricultural producers are defined by the Small Business Administration (SBA) as those

having annual receipts less than $750,000, and small agricultural service firms are defined as those whose annual receipts are less than $6,500,000 (13 CFR 121.201).

Based on industry and Committee data, the average annual price for fresh Florida tomatoes during the 2004–05 season was approximately $12.50 per 25-pound container, and fresh shipments totaled 53,025,915 25-pound cartons of tomatoes. Committee data indicates approximately 27 percent of the handlers handle 95 percent of the total volume shipped outside the regulated area. Based on the average price, about 75 percent of handlers could be considered small businesses under SBA's definition. In addition, based on production, grower prices as reported by the National Agricultural Statistics Service, and the total number of Florida tomato growers, the average annual grower revenue is below $750,000. Thus, the majority of handlers and producers of Florida tomatoes may be classified as small entities.

This rule would provide a partial exemption to the minimum grade requirements for tomatoes grown in Florida. Under the order, Florida tomatoes must meet at least a U.S. No. 2 grade before they can be shipped and sold outside the regulated area. This rule would exempt UglyRipe tomatoes from the shape requirements specified under the Standards for a U.S. No. 2 grade. This change would increase the volume of UglyRipe tomatoes that would meet the order requirements, and would help increase shipments and availability of these tomatoes for consumers. This rule would amend the provisions of § 966.323. Authority for this action is provided in § 966.52 of the order.

This change would represent a small increase in costs for producers and handlers of UglyRipe tomatoes, primarily from costs associated with developing and maintaining the IP program. However, the majority of facilities associated with UglyRipe tomatoes were involved with the IP program prior to this proposed rule and have already received a successful audit. Therefore, the additional costs associated with this action would be those costs related to maintaining and complying with the IP program. It is anticipated that these costs would be minimal.

In addition, this rule would make additional volumes of UglyRipe tomatoes available for shipment. This should result in increased sales of UglyRipe tomatoes. Consequently, the benefits of this action should more than offset the associated costs.

One alternative to this action that was considered was to not provide an exemption from shape requirements for UglyRipe tomatoes. However, providing the exemption would increase the volume of UglyRipe tomatoes that would meet the order requirements, and would help increase shipments and availability of these tomatoes. Therefore, this alternative was rejected.

This rule would not impose any additional reporting or recordkeeping requirements beyond the IP program on either small or large tomato handlers. As with all Federal marketing order programs, reports and forms are periodically reviewed to reduce information requirements and duplication by industry and public sector agencies.

AMS is committed to compliance with the Government Paperwork Elimination Act (GPEA), which requires Government agencies in general to provide the public the option of submitting information or transacting business electronically to the maximum extent possible.

USDA has not identified any relevant Federal rules that duplicate, overlap or conflict with this proposed rule.

Interested persons are invited to submit information on the regulatory and informational impacts of this action on small businesses.

A small business guide on complying with fruit, vegetable, and specialty crop marketing agreements and orders may be viewed at: *http://www.ams.usda.gov/fv/moab.html*. Any questions about the compliance guide should be sent to Jay Guerber at the previously mentioned address in the **FOR FURTHER INFORMATION CONTACT** section.

This rule invites comments on a proposed partial exemption to the minimum grade requirements prescribed under the order. A 60-day comment period is provided to allow interested persons to respond to this proposal. All written comments timely received will be considered before a final determination is made on this matter.

List of Subjects in 7 CFR Part 966

Marketing agreements, Reporting and recordkeeping requirements, Tomatoes.

For the reasons set forth in the preamble, 7 CFR part 966 is proposed to be amended as follows:

PART 966—TOMATOES GROWN IN FLORIDA

1. The authority citation for 7 CFR part 966 continues to read as follows:

Authority: 7 U.S.C. 601–674.

2. Amend § 966.323, by adding a new paragraph (d)(5) to read as follows:

§ 966.323 Handling regulation.

* * * * *

(d) * * *

(5) *For UglyRipe*™ tomatoes. UglyRipe ™ tomatoes must meet all the requirements of this section: *Provided*, That UglyRipe™ tomatoes shall be graded and at least meet the requirements specified for U.S. No. 2 under the U.S. Standards for Grades of Fresh Tomatoes, except they are exempt from the requirements that they be reasonably well formed and not more than slightly rough, and *Provided*, Further that the UglyRipe™ tomatoes meet the requirements of the Identity Preservation program, Fresh Products Branch, Fruit and Vegetable Programs, AMS, USDA.

* * * * *

Dated: June 26, 2006.

Lloyd C. Day,

Administrator, Agricultural Marketing Service.

[FR Doc. 06–5833 Filed 6–27–06; 12:01 pm]

BILLING CODE 3410–02–P

DEPARTMENT OF AGRICULTURE

Agricultural Marketing Service

7 CFR Part 980

[Docket No. FV06–980–1 PR]

Vegetables, Import Regulations; Partial Exemption to the Minimum Grade Requirements for Fresh Tomatoes

AGENCY: Agricultural Marketing Service, USDA.

ACTION: Proposed rule.

SUMMARY: This rule invites comments on a proposed partial exemption to the minimum grade requirements under the tomato import regulation. The import regulation is authorized under section 8e of the Agricultural Marketing Agreement Act of 1937 (Act). Section 8e requires imported tomatoes to meet the same or comparable grade and size requirements as those in effect under Federal Marketing Order No. 966 (order). The order regulates the handling of tomatoes grown in Florida. A separate proposed rule to amend the rules and regulations under the order to exempt UglyRipe (UglyRipe) tomatoes from the shape requirements associated with the U.S. No. 2 grade is being issued by Department of Agriculture (USDA). This rule would provide the same partial exemption under the import regulation so it would conform to the regulations for Florida tomatoes under the order.

DATES: Comments must be received by August 28, 2006.

ADDRESSES: Interested persons are invited to submit written comments concerning this proposal. Comments must be sent to the Docket Clerk, Marketing Order Administration Branch, Fruit and Vegetable Programs, AMS, USDA, 1400 Independence Avenue, SW., STOP 0237, Washington, DC 20250–0237; Fax: (202) 720–8938; E-mail: *moab.docketclerk@usda.gov*; or Internet: *http://www.regulations.gov.* All comments should reference the docket number and the date and page number of this issue of the **Federal Register** and will be made available for public inspection in the Office of the Docket Clerk during regular business hours, or can be viewed at: *http://www.ams.usda.gov/fv/moab.html.*

FOR FURTHER INFORMATION CONTACT: William Pimental or Christian Nissen, Southeast Marketing Field Office, Marketing Order Administration Branch, Fruit and Vegetable Programs, AMS, USDA; telephone: (863) 324–3375, Fax: (863) 325–8793; e-mail: *william.pimental@usda.gov* or *christian.nissen@usda.gov.*

Small businesses may request information on complying with this regulation by contacting Jay Guerber, Marketing Order Administration Branch, Fruit and Vegetable Programs, AMS, USDA, 1400 Independence Avenue, SW., STOP 0237, Washington, DC 20250–0237; telephone: (202) 720–2491, Fax: (202) 720–8938, or E-mail: *Jay.Guerber@usda.gov.*

SUPPLEMENTARY INFORMATION: This proposed rule is issued under section 8e of the Agricultural Marketing Agreement Act of 1937, as amended (7 U.S.C. 601–674), hereinafter referred to as the ''Act,'' which provides that whenever certain specified commodities, including tomatoes, are regulated under a Federal marketing order, imports of these commodities into the United States are prohibited unless they meet the same or comparable grade, size, quality, or maturity requirements as those in effect for the domestically produced commodity.

USDA is issuing this rule in conformance with Executive Order 12866.

This rule has been reviewed under Executive Order 12988, Civil Justice Reform. This rule is not intended to have retroactive effect. This rule will not preempt any State or local laws, regulations, or policies, unless they present an irreconcilable conflict with this rule.

There are no administrative procedures which must be exhausted prior to any judicial challenge to the provisions of import regulations issued under section 8e of the Act.

This proposed rule would provide a partial exemption to the minimum grade requirements for UglyRipe tomatoes imported into the United States. The import requirements for tomatoes specify that tomatoes must meet at least a U.S. No. 2 grade. A proposed rule to amend the rules and regulations under the order to exempt UglyRipe tomatoes from the shape requirements associated with the U.S. No. 2 grade is being issued separately by USDA. This rule would provide the same partial exemption under the import regulation so it would conform to the regulations for Florida tomatoes under the order.

The order provides the authority for the establishment of grade requirements for Florida tomatoes. Section 966.323 of the order specifies, in part, the minimum grade requirements for tomatoes grown in Florida. The current minimum grade requirement for Florida tomatoes is a U.S. No. 2. The specifics of this grade requirement are listed under the U.S. Standards for Grades of Fresh Tomatoes (7 CFR 51.1855–51.1877).

The U.S. Standards for Grades of Fresh Tomatoes (Standards) specify the criteria tomatoes must meet to grade a U.S. No. 2, including that they must be reasonably well formed, and not more than slightly rough. These two factors relate specifically to the shape of the tomato. The definitions section of the Standards defines reasonably well formed as not decidedly kidney shaped, lopsided, elongated, angular, or otherwise decidedly deformed. The term slightly rough means that the tomato is not decidedly ridged or grooved.

UglyRipe tomatoes are a trademarked tomato variety bred to look and taste like an heirloom-type tomato. One of the characteristics of this variety is its appearance. UglyRipe tomatoes are often shaped differently from other round tomatoes. Depending on the time of year and the weather, UglyRipe tomatoes are concave on the stem end with deep, ridged shoulders. They can also appear kidney shaped and lopsided. Because of this variance in shape and appearance, UglyRipe tomatoes can have difficulty meeting the shape requirements of the U.S. No. 2 grade.

This rule would provide UglyRipe tomatoes with a partial exemption from the grade requirements under the import regulation. UglyRipe tomatoes would only be exempt from the shape requirements of the grade and would still be required to meet all other aspects of the U.S. No. 2 grade. The UglyRipe tomato also continues to be required to meet all other requirements under the import regulation, such as size and inspection.

Prior to the 1998–99 season, the Florida Tomato Committee (Committee), which locally administers the order, recommended that the minimum grade be increased from a U.S. No. 3 to a U.S. No. 2. A conforming change was also made to the import regulation. Some Committee members have stated that a large part of the volume of the standard commercial varieties of tomatoes which fail to make the grade are rejected because of their shape and appearance. Consequently, there was some industry concern that providing an exemption for the UglyRipe tomato could result in the shipment of U.S. No. 3 grade tomatoes of other varieties, contrary to the objectives of the exemption and the order.

To address this concern, the producers of UglyRipe tomatoes pursued entry into USDA's Identity Preservation (IP) program. This program was developed by the Agricultural Marketing Service to assist companies in marketing products having unique traits. The program provides independent, third-party verification of the segregation of a company's unique product at every stage, from seed, production and processing, to distribution. The UglyRipe tomato was granted positive program status in early 2006.

This partial exemption would only extend to UglyRipe tomatoes covered under the IP program. As such, this should help ensure that only UglyRipe tomatoes would be shipped under the proposed exemption. In addition, this exemption would be contingent upon imported UglyRipe tomatoes continuing to meet the specific requirements related to imports established under the IP program.

This proposed rule would exempt imported UglyRipe tomatoes from the shape requirements associated with the U.S. No. 2 grade. This change would increase the volume of UglyRipe tomatoes that would meet order requirements, and would help increase shipments and availability of these tomatoes.

This rule would bring the tomatoes import regulation into conformity with the proposed changes to the domestic order making the import requirements correspond to the domestic requirements under the order by amending 7 CFR 980.212 of the import requirements.

Initial Regulatory Flexibility Analysis

Pursuant to requirements set forth in the Regulatory Flexibility Act (RFA), the Agricultural Marketing Service (AMS) has considered the economic impact of this action on small entities. Accordingly, AMS has prepared this initial regulatory flexibility analysis.

The purpose of the RFA is to fit regulatory actions to the scale of business subject to such actions in order that small businesses will not be unduly or disproportionately burdened. Marketing orders issued pursuant to the Act, and rules issued thereunder, are unique in that they are brought about through group action of essentially small entities acting on their own behalf. Thus, both statutes have small entity orientation and compatibility. Import regulations issued under the Act are based on those established under Federal marketing orders.

There are approximately 225 importers of tomatoes subject to the regulation. Small agricultural service firms, which include tomato importers, are defined by the Small Business Administration (SBA) as those having annual receipts of less than $6,500,000 (13 CFR 121.201). Based on information from the Foreign Agricultural Service, USDA, the dollar value of imported tomatoes ranged from around $1.05 billion in 2003 to $1.08 billion in 2005. Using these numbers, the majority of tomatoes importers may be classified as small entities.

Mexico, Canada, and the Netherlands are the major tomato producing countries exporting tomatoes to the United States. In 2005, shipments of tomatoes imported into the United States totaled 951,787 metric tons. Mexico accounted for 801,408 metric tons, 141,642 metric tons were imported from Canada, and 6,249 metric tons arrived from the Netherlands.

This proposed rule would provide a partial exemption to the minimum grade requirements for UglyRipe tomatoes imported into the United States. The import requirements for tomatoes specify that tomatoes must meet at least a U.S. No. 2 grade before they can be shipped and sold into the fresh market. A proposed rule which would amend the rules and regulations under the order to exempt UglyRipe tomatoes from the shape requirements associated with the U.S. No. 2 grade is being issued by USDA. Accordingly, under section 8e of the Act, imports of tomatoes would have to meet the same or comparable grade, size, quality, and maturity requirements as the domestic product. This rule would provide the same partial exemption for UglyRipe tomatoes under the import regulation so it would conform to the domestic regulation.

This change would represent a small increase in costs for importers of UglyRipe tomatoes, primarily from costs associated with developing and maintaining an IP program. However, the majority of importers associated with UglyRipe tomatoes were involved with the IP program prior to this proposed rule and have already received a successful audit. Therefore, the additional costs associated with this action would be those costs related to maintaining and complying with the IP program. It is anticipated that these costs would be minimal.

In addition, this rule would make additional volumes of UglyRipe tomatoes available for shipment. This should result in increased sales of UglyRipe tomatoes. Consequently, the benefits of this action should more than offset the associated costs.

Section 8e of the Act provides that when certain domestically produced commodities, including tomatoes, are regulated under a Federal marketing order, imports of that commodity must meet the same or comparable grade, size, quality, and maturity requirements. Since a proposed rule is being initiated that would provide a partial exemption to the minimum grade requirements under the domestic handling regulations, a corresponding change to the import regulations would also need to be accomplished.

This rule would impose no additional reporting or recordkeeping requirements beyond the IP program on either small or large tomato importers. Reports and forms required under the import regulations for tomatoes are periodically reviewed to reduce information requirements and duplication by industry and public sector agencies.

AMS is committed to compliance with the Government Paperwork Elimination Act, which requires Government agencies in general to provide the public the option of submitting information or transacting business electronically to the maximum extent possible.

Additionally, except for applicable domestic regulations, USDA has not identified any relevant Federal rules that duplicate, overlap, or conflict with this rule. Finally, all interested persons are invited to submit information on the regulatory and informational impacts of this action on small businesses.

A small business guide on complying with fruit, vegetable, and specialty crop marketing agreements and orders may be viewed at: *http://www.ams.usda.gov/fv/moab.html.* Any questions about the compliance guide should be sent to Jay Guerber at the previously mentioned address in the **FOR FURTHER INFORMATION CONTACT** section.

In accordance with section 8e of the Act, the United States Trade Representative has concurred with the issuance of this proposed rule.

This rule invites comments on a proposed partial exemption to the minimum grade requirements for imported tomatoes. A 60-day comment period is provided to allow interested persons to respond to this rule. All comments received will be considered prior to finalization of this rule.

List of Subjects in 7 CFR Part 980

Food grades and standards, Imports, Marketing agreements, Onions, Potatoes, Tomatoes.

For the reasons set forth in the preamble, 7 CFR part 980 is proposed to be amended as follows:

PART 980—VEGETABLES; IMPORT REGULATIONS

1. The authority citation for 7 CFR part 980 continues to read as follows:

Authority: 7 U.S.C. 601–674.

2. Amend § 980.212, by adding a sentence at the end of paragraph (b)(1) to read as follows:

§ 980.212 Import regulation; tomatoes.

* * * * *

(b) * * *

(1) * * * *Provided,* That UglyRipe™ tomatoes shall be graded and at least meet the requirements specified for U.S. No. 2 under the U.S. Standards for Grades of Fresh Tomatoes, except they are exempt from the requirements that they be reasonably well formed and not more than slightly rough, and *Provided,* Further that the UglyRipe™ tomatoes meet the requirements of the Identity Preservation program, Fresh Products Branch, Fruit and Vegetable Programs, AMS, USDA.

* * * * *

Dated: June 26, 2006.

Lloyd C. Day,

Administrator, Agricultural Marketing Service.

[FR Doc. 06–5832 Filed 6–27–06; 12:01 pm]

BILLING CODE 3410–02–P

DEPARTMENT OF ENERGY

Federal Energy Regulatory Commission

18 CFR Parts 35 and 37

[Docket Nos. RM05–25–000 and RM05–17–000]

Preventing Undue Discrimination and Preference in Transmission Service

AGENCY: Federal Energy Regulatory Commission.

ACTION: Correction.

SUMMARY: This document corrects a paragraph formatting and numbering error in a notice of proposed rulemaking that the Federal Energy Regulatory Commission published in the **Federal Register** on June 6, 2006. That action proposed amendments to Commission Order Nos. 888 and 889.

DATES: *Effective Date:* June 6, 2006.

FOR FURTHER INFORMATION CONTACT: David D. Withnell, Office of the General Counsel, Federal Energy Regulatory Commission at (202) 502–8421.

SUPPLEMENTARY INFORMATION: In FR Document 06–4904, published on June 6, 2006 (71 FR 32636) make the following correction:

On page 32695, in column 3, paragraph nos. 395 and 396 should be merged into one paragraph and designated no. 395. Paragraph no. 397 becomes 396 and the subsequent paragraph numbers are corrected accordingly. (The corrected sequence runs from the renumbered paragraph no. 396 to the last paragraph in the preamble, which will be paragraph no. 499.)

Magalie R. Salas,

Secretary.

[FR Doc. E6–10146 Filed 6–28–06; 8:45 am]

BILLING CODE 6717–01–P

DEPARTMENT OF THE TREASURY

Internal Revenue Service

26 CFR Part 1

[REG–111578–06]

RIN 1545–BF56

Computer Software Under Section 199(c)(5)(B); Correction

AGENCY: Internal Revenue Service (IRS), Treasury.

ACTION: Correction to notice of proposed rulemaking by cross-reference to temporary regulations.

SUMMARY: This document corrects a notice of proposed rulemaking by cross-reference to temporary regulations (REG–111578–06) that was published in the **Federal Register** on Thursday, June 1, 2006 (71 FR 31128). The document contains temporary regulations concerning the application of section 199 of the Internal Revenue Code, which provides a deduction for income attributable to domestic production activities, to certain transactions involving computer software.

FOR FURTHER INFORMATION CONTACT: Paul Handleman or Lauren Ross Taylor, (202) 622–3040 (not a toll-free number).

SUPPLEMENTARY INFORMATION:

Background

The notice of proposed rulemaking by cross-reference to temporary regulations (REG–111578–06) that is the subject of this correction is under section 199 of the Internal Revenue Code.

Need for Correction

As published, REG–111578–06 contains an error that may prove to be misleading and is in need of clarification.

Correction of Publication

Accordingly, the notice of proposed rulemaking by cross-reference to temporary regulations (REG–111578–06), that was the subject of FR Doc. 06–4827, is corrected as follows:

On page 31129, column 1, in the signature block, the language ''Mark E. Mathews,'' is corrected to read ''Mark E. Matthews, ''.

Guy R. Traynor,

Chief, Publications and Regulations Branch, Legal Processing Division, Associate Chief Counsel (Procedure and Administration).

[FR Doc. E6–10250 Filed 6–28–06; 8:45 am]

BILLING CODE 4830–01–P

DEPARTMENT OF HOMELAND SECURITY

Coast Guard

33 CFR Part 100

[CGD05–06–064]

RIN 1625–AA08

Special Local Regulations for Marine Events; Atlantic Ocean, Ocean City, MD

AGENCY: Coast Guard, DHS.

ACTION: Notice of proposed rulemaking.

SUMMARY: The Coast Guard proposes to establish special local regulations during the ''Ocean City Maryland Offshore Challenge'', a power boat race to be held on the waters of the Atlantic Ocean adjacent to the shoreline at Ocean City, MD. These special local regulations are necessary to provide for the safety of life on navigable waters during the event. This action is intended to restrict vessel traffic in the regulated area during the power boat race.

DATES: Comments and related material must reach the Coast Guard on or before July 31, 2006.

ADDRESSES: You may mail comments and related material to Commander (dpi), Fifth Coast Guard District, 431 Crawford Street, Portsmouth, Virginia 23704–5004, hand-deliver them to Room 415 at the same address between 9 a.m. and 2 p.m., Monday through Friday, except Federal holidays, or fax them to (757) 391–8149. The Inspections and Investigations Branch, Fifth Coast Guard District, maintains the public docket for this rulemaking. Comments and material received from the public, as well as documents indicated in this preamble as being available in the docket, will become part of this docket and will be available for inspection or copying at the above address between 9 a.m. and 2 p.m., Monday through Friday, except Federal holidays.

FOR FURTHER INFORMATION CONTACT: Dennis Sens, Project Manager, Inspections and Investigations Branch, at (757) 398–6204.

SUPPLEMENTARY INFORMATION:

Request for Comments

We encourage you to participate in this rulemaking by submitting comments and related material. If you do so, please include your name and address, identify the docket number for this rulemaking (CGD05–06–064), indicate the specific section of this document to which each comment applies, and give the reason for each comment. Please submit all comments and related material in an unbound format, no larger than 8½ by 11 inches, suitable for copying. If you would like to know they reached us, please enclose a stamped, self-addressed postcard or envelope. We will consider all comments and material received during the comment period. We may change this proposed rule in view of them.

Public Meeting

We do not now plan to hold a public meeting. But you may submit a request for a meeting by writing to the address listed under **ADDRESSES** explaining why one would be beneficial. If we determine that one would aid this

rulemaking, we will hold one at a time and place announced by a later notice in the **Federal Register**.

Background and Purpose

On September 10, 2006, the Offshore Performance Association, Inc. will conduct the ''Ocean City Maryland Offshore Challenge'', on the waters of the Atlantic Ocean along the shoreline near Ocean City, MD. The event will consist of approximately 40 V-hull and twin-hull inboard hydroplanes racing in heats counter-clockwise around an oval race course. A fleet of spectator vessels is anticipated to gather nearby to view the competition. Due to the need for vessel control during the event, vessel traffic would be temporarily restricted to provide for the safety of participants, spectators and transiting vessels.

Discussion of Proposed Rule

The Coast Guard proposes to establish temporary special local regulations on specified waters of the Atlantic Ocean adjacent to Ocean City, MD. The regulated area includes a section of the Atlantic Ocean approximately two miles long, and one half mile wide, the course is approximately 300 yards offshore and runs parallel with the Ocean City, Maryland shoreline. The southern boundary of the regulated area is adjacent to and due east of 5th Street and the northern boundary of the area is adjacent to and due east of 43rd Street at Ocean City, Maryland. The temporary special local regulations would be enforced from 10 a.m. to 4 p.m. on September 10, 2006, and would restrict general navigation in the regulated area during the power boat race. The Coast Guard, at its discretion, when practical would allow the passage of vessels when races are not taking place. Except for participants and vessels authorized by the Coast Guard Patrol Commander, no person or vessel would be allowed to enter or remain in the regulated area during the enforcement period. These regulations are needed to control vessel traffic during the event to enhance the safety of participants, spectators and transiting vessels.

Regulatory Evaluation

This proposed rule is not a ''significant regulatory action'' under section 3(f) of Executive Order 12866, Regulatory Planning and Review, and does not require an assessment of potential costs and benefits under section 6(a)(3) of that Order. The Office of Management and Budget has not reviewed it under that Order. It is not ''significant'' under the regulatory policies and procedures of the Department of Homeland Security (DHS).

We expect the economic impact of this proposed rule to be so minimal that a full Regulatory Evaluation under the regulatory policies and procedures of DHS is unnecessary.

Although this proposed regulation would prevent traffic from transiting a small segment of the Atlantic Ocean near Ocean City, MD during the event, the effect of this regulation will not be significant due to the limited duration that the regulated area would be enforced. Extensive advance notifications would be made to the maritime community via Local Notice to Mariners, marine information broadcasts, area newspapers and local radio stations, so mariners can adjust their plans accordingly.

Small Entities

Under the Regulatory Flexibility Act (5 U.S.C. 601–612), we have considered whether this proposed rule would have a significant economic impact on a substantial number of small entities. The term ''small entities'' comprises small businesses, not-for-profit organizations that are independently owned and operated and are not dominant in their fields, and governmental jurisdictions with populations of less than 50,000.

The Coast Guard certifies under 5 U.S.C. 605(b) that this proposed rule would not have a significant economic impact on a substantial number of small entities. This proposed rule would affect the following entities, some of which might be small entities: The owners or operators of vessels intending to transit this section of the Atlantic Ocean during the event.

This proposed rule would not have a significant economic impact on a substantial number of small entities for the following reasons. This proposed rule would be in effect for only a limited period. Although the regulated area would apply to waters of the Atlantic Ocean near the Ocean City, Maryland shoreline, traffic would be allowed to pass through the regulated area with the permission of the Coast Guard patrol commander. In the case where the patrol commander authorizes passage through the regulated area during the event, vessels would be required to proceed at the minimum speed necessary to maintain a safe course that minimizes wake near the race course. Before the enforcement period, we would issue maritime advisories so mariners can adjust their plans accordingly.

If you think that your business, organization, or governmental jurisdiction qualifies as a small entity and that this rule would have a significant economic impact on it, please submit a comment (see **ADDRESSES**) explaining why you think it qualifies and how and to what degree this rule would economically affect it.

Assistance for Small Entities

Under section 213(a) of the Small Business Regulatory Enforcement Fairness Act of 1996 (Pub. L. 104–121), we want to assist small entities in understanding this proposed rule so that they can better evaluate its effects on them and participate in the rulemaking. If the rule would affect your small business, organization, or governmental jurisdiction and you have questions concerning its provisions or options for compliance, please contact the address listed under **ADDRESSES**. The Coast Guard will not retaliate against small entities that question or complain about this rule or any policy or action of the Coast Guard.

Small businesses may send comments on the actions of Federal employees who enforce, or otherwise determine compliance with Federal regulations to the Small Business and Agriculture Regulatory Enforcement Ombudsman and the Regional Small Business Regulatory Fairness Boards. The Ombudsman evaluates these actions annually and rates each agency's responsiveness to small business. If you wish to comment on actions by employees of the Coast Guard, call 1–888–REG–FAIR (1–888–734–3247).

Collection of Information

This proposed rule would call for no new collection of information under the Paperwork Reduction Act of 1995 (44 U.S.C. 3501–3520.).

Federalism

A rule has implications for federalism under Executive Order 13132, Federalism, if it has a substantial direct effect on State or local governments and would either preempt State law or impose a substantial direct cost of compliance on them. We have analyzed this proposed rule under that Order and have determined that it does not have implications for federalism.

Unfunded Mandates Reform Act

The Unfunded Mandates Reform Act of 1995 (2 U.S.C. 1531–1538) requires Federal agencies to assess the effects of their discretionary regulatory actions. In particular, the Act addresses actions that may result in the expenditure by a State, local, or tribal government, in the aggregate, or by the private sector of $100,000,000 or more in any one year.

Though this proposed rule would not result in such an expenditure, we do discuss the effects of this rule elsewhere in this preamble.

Taking of Private Property

This proposed rule would not effect a taking of private property or otherwise have taking implications under Executive Order 12630, Governmental Actions and Interference with Constitutionally Protected Property Rights.

Civil Justice Reform

This proposed rule meets applicable standards in sections 3(a) and 3(b)(2) of Executive Order 12988, Civil Justice Reform, to minimize litigation, eliminate ambiguity, and reduce burden.

Protection of Children

We have analyzed this proposed rule under Executive Order 13045, Protection of Children from Environmental Health Risks and Safety Risks. This rule is not an economically significant rule and would not create an environmental risk to health or risk to safety that might disproportionately affect children.

Indian Tribal Governments

This proposed rule does not have tribal implications under Executive Order 13175, Consultation and Coordination with Indian Tribal Governments, because it would not have a substantial direct effect on one or more Indian tribes, on the relationship between the Federal Government and Indian tribes, or on the distribution of power and responsibilities between the Federal Government and Indian tribes.

Energy Effects

We have analyzed this proposed rule under Executive Order 13211, Actions Concerning Regulations That Significantly Affect Energy Supply, Distribution, or Use. We have determined that it is not a ''significant energy action'' under that order because it is not a ''significant regulatory action'' under Executive Order 12866 and is not likely to have a significant adverse effect on the supply, distribution, or use of energy. The Administrator of the Office of Information and Regulatory Affairs has not designated it as a significant energy action. Therefore, it does not require a Statement of Energy Effects under Executive Order 13211.

Technical Standards

The National Technology Transfer and Advancement Act (NTTAA) (15 U.S.C. 272 note) directs agencies to use voluntary consensus standards in their regulatory activities unless the agency provides Congress, through the Office of Management and Budget, with an explanation of why using these standards would be inconsistent with applicable law or otherwise impractical. Voluntary consensus standards are technical standards (*e.g.*, specifications of materials, performance, design, or operation; test methods; sampling procedures; and related management systems practices) that are developed or adopted by voluntary consensus standards bodies.

This proposed rule does not use technical standards. Therefore, we did not consider the use of voluntary consensus standards.

Environment

We have analyzed this proposed rule under Commandant Instruction M16475.lD and Department of Homeland Security Management Directive 5100.1, which guides the Coast Guard in complying with the National Environmental Policy Act of 1969 (NEPA) (42 U.S.C. 4321–4370f), and have concluded that there are no factors in this case that would limit the use of a categorical exclusion under section 2.B.2 of the Instruction. Therefore, this rule is categorically excluded, under figure 2–1, paragraph (34)(h), of the Instruction, from further environmental documentation. Special local regulations issued in conjunction with a regatta or marine parade permit are specifically excluded from further analysis and documentation under that section.

Under figure 2–1, paragraph (34)(h), of the Instruction, an ''Environmental Analysis Check List'' and a ''Categorical Exclusion Determination'' are not required for this rule. Comments on this section will be considered before we make the final decision on whether to categorically exclude this rule from further environmental review.

List of Subjects in 33 CFR Part 100

Marine safety, Navigation (water), Reporting and recordkeeping requirements, Waterways.

For the reasons discussed in the preamble, the Coast Guard proposes to amend 33 CFR part 100 as follows:

PART 100—SAFETY OF LIFE ON NAVIGABLE WATERS

1. The authority citation for part 100 continues to read as follows:

Authority: 33 U.S.C. 1233; Department of Homeland Security Delegation No. 0170.1.

2. From 10 a.m. to 4 p.m. on September 10, 2006, add a temporary *§ 100.35–T05–064* to read as follows:

§ 100.35–T05–064 Atlantic Ocean, Ocean City, MD.

(a) *Regulated area.* The regulated area is established for the waters of the Atlantic Ocean bounded by a line drawn from a position along the shoreline near Ocean City, MD at latitude 38°22′01″ N., longitude 075°03′56″ W., thence easterly to latitude 38°21′50″ N., longitude 075°03′28″ W., thence southwesterly to latitude 38°20′10″ N., longitude 075°04′08″ W., thence westerly to a position near the shoreline at latitude 38°20′15″ N., longitude 075°04′38″ W., thence northerly along the shoreline to the point of origin. All coordinates reference Datum NAD 1983.

(b) *Definitions.* (1) *Coast Guard Patrol Commander* means a commissioned, warrant, or petty officer of the Coast Guard who has been designated by the Commander, Coast Guard Sector Hampton Roads.

(2) *Official Patrol* means any vessel assigned or approved by Commander, Coast Guard Sector Hampton Roads with a commissioned, warrant, or petty officer on board and displaying a Coast Guard ensign.

(3) *Participant* includes all vessels participating in the Ocean City, Maryland Offshore Challenge under the auspices of the Marine Event Permit issued to the event sponsor and approved by Commander, Coast Guard Sector Hampton Roads.

(c) *Special local regulations.* (1) Except for event participants and persons or vessels authorized by the Coast Guard Patrol Commander, no person or vessel may enter or remain in the regulated area.

(2) The operator of any vessel in the regulated area must stop the vessel immediately when directed to do so by any Official Patrol and then proceed only as directed.

(3) All persons and vessels shall comply with the instructions of the Official Patrol.

(4) When authorized to transit the regulated area, all vessels shall proceed at the minimum speed necessary to maintain a safe course that minimizes wake near the race course.

(d) *Enforcement period.* This section will be enforced from 10 a.m. to 4 p.m. on September 10, 2006.

Dated: June 16, 2006.

L.L. Hereth,

Rear Admiral, U.S. Coast Guard, Commander, Fifth Coast Guard District.

[FR Doc. E6–10251 Filed 6–28–06; 8:45 am]

BILLING CODE 4910–15–P

DEPARTMENT OF HOMELAND SECURITY

Coast Guard

33 CFR Part 117

[CGD05–06–045]

RIN 1625–AA09

Drawbridge Operation Regulations; New Jersey Intracoastal Waterway (NJICW), Grassy Sound Channel, Great Channel, and Townsend Inlet, NJ

AGENCY: Coast Guard, DHS.

ACTION: Notice of proposed rulemaking.

SUMMARY: The Coast Guard proposes to change the drawbridge operation regulations of four Cape May County Bridge Commission (CMCBC) bridges: the Townsend Inlet Bridge, at mile 0.3 in Avalon; the County of Cape May Bridge, at mile 0.7, across Great Channel between Stone Harbor and Nummy Island; the Ocean Drive Bridge, at mile 1.0, across Grassy Sound Channel in North Wildwood; and the Two-Mile Bridge, at NJICW mile 112.2, across Middle Thorofare in Wildwood Crest, in NJ. This proposal will allow the bridges to remain in the closed position at particular dates and times to accommodate the Ocean Drive Marathon. Vessels that can pass under the bridges without a bridge opening may do so at all times.

DATES: Comments and related material must reach the Coast Guard on or before August 14, 2006.

ADDRESSES: You may mail comments and related material to Commander (dpb), Fifth Coast Guard District, Federal Building, 1st Floor, 431 Crawford Street, Portsmouth, VA 23704–5004. The Fifth Coast Guard District maintains the public docket for this rulemaking. Comments and material received from the public, as well as documents indicated in this preamble as being available in the docket, will become part of this docket and will be available for inspection or copying at Commander (dpb), Fifth Coast Guard District between 8 a.m. and 4 p.m., Monday through Friday, except Federal holidays.

FOR FURTHER INFORMATION CONTACT: Gary Heyer, Bridge Management Specialist, Fifth Coast Guard District, at (757) 398–6629.

SUPPLEMENTARY INFORMATION:

Request for Comments

We encourage you to participate in this rulemaking by submitting comments and related material. If you do so, please include your name and address, identify the docket number for this rulemaking, CGD05–06–045, indicate the specific section of this document to which each comment applies, and give the reason for each comment. Please submit all comments and related material in an unbound format, no larger than 8½ by 11 inches, suitable for copying. If you would like a return receipt, please enclose a stamped, self-addressed postcard or envelope. We will consider all submittals received during the comment period. We may change this proposed rule in view of them.

Public Meeting

We do not now plan to hold a public meeting. But you may submit a request for a meeting by writing to Commander (dpb), Fifth Coast Guard District at the address under **ADDRESSES** explaining why one would be beneficial. If we determine that one would aid this rulemaking, we will hold one at a time and place announced by a later notice in the **Federal Register**.

Background and Purpose

On behalf of the Ocean Drive Run Club, Inc., (Ocean Drive RC), CMCBC requested changes to the operating drawbridge regulations to accommodate the Ocean Drive Marathon. The race is an annual event sponsored by the Ocean Drive RC, attracting spectators and participants from the surrounding cities and states.

In accordance with 33 CFR 117.37(a) for reasons of public safety or for public functions, the District Commander may authorize the opening and closing of a drawbridge for a specified period of time.

CMCBC who owns and operates the Townsend Inlet Bridge, at mile 0.3 in Avalon; the County of Cape May Bridge, at mile 0.7, across Great Channel between Stone Harbor and Nummy Island; the Grassy Sound Channel Bridge, at mile 1.0 in North Wildwood; and the Two-Mile Bridge, at NJICW mile 112.2, across Middle Thorofare in Wildwood Crest, requested the following drawbridge changes:

Great Channel

The County of Cape May Bridge, at mile 0.7, across Great Channel between Stone Harbor and Nummy Island has a vertical clearance of 15 feet above mean high water (MHW) and 19 feet above mean low water (MLW) in the closed position to vessels. The existing regulation is listed at 33 CFR 117.720.

The Ocean Drive Marathon is held on the fourth Sunday in March of every year with the third Sunday used as the alternate day, if the fourth Sunday falls on a religious holiday. To facilitate the race, the proposal will maintain the bridge in the closed-to-navigation position from 9:15 a.m. to 2:30 p.m. on the fourth Sunday in March of every year.

Grassy Sound Channel

The Grassy Sound Channel Bridge, at mile 1.0 in Middle Township, has a vertical clearance of 15 feet above MHW and 19 feet above MLW in the closed position to vessels. The existing regulation is listed at 33 CFR 117.721.

The Ocean Drive Marathon is held on the fourth Sunday in March of every year with the third Sunday used as the alternate day, if the fourth Sunday falls on a religious holiday. To facilitate the race, the proposal will maintain the bridge in the closed-to-navigation position from 9:15 a.m. to 2:30 p.m. on the fourth Sunday in March of every year.

New Jersey Intracoastal Waterway

The Two-Mile Bridge, at NJICW mile 112.2 at Wildwood Crest, has a vertical clearance of 23 feet above MHW and 27 feet above MLW in the closed position to vessels. The existing operating regulations are set out in 33 CFR 117.5 which requires the bridge to open on signal.

The Ocean Drive Marathon is held on the fourth Sunday in March of every year with the third Sunday used as the alternate day, if the fourth Sunday falls on a religious holiday. To facilitate the race, the proposal will maintain the bridge in the closed-to-navigation position from 9:15 a.m. to 10:30 a.m. on the fourth Sunday in March of every year.

Townsend Inlet

The Townsend Inlet Bridge, at mile 0.3 in Avalon, has a vertical clearance of 23 feet above MHW and 26 feet above MLW in the closed position to vessels. The existing regulation is listed at 33 CFR 117.5, which requires the bridge to open on signal.

The Ocean Drive Marathon is held on the fourth Sunday in March of every year with the third Sunday used as the alternate day, if the fourth Sunday falls on a religious holiday. To facilitate the race, the proposal will maintain the bridge in the closed-to-navigation position from 9:15 a.m. to 2:30 p.m. on the fourth Sunday in March of every year.

The Coast Guard believes that the proposed changes are reasonable due to the short duration the drawbridges will be maintained in the closed position to vessels and because this event has been observed in past years with little or no

impact to marine or vehicular traffic. This is also a necessary measure to facilitate public safety and allow for the orderly movement of participants and vehicular traffic before, during and after the race.

Discussion of Proposed Rule

Great Channel

This proposed rule amends 33 CFR 117.720 which details the operating regulations for the County of Cape May Bridge.

A new paragraph (c) will be added to § 117.720, which allows the County of Cape May Bridge to remain in the closed-to-navigation position from 9:15 a.m. to 2:30 p.m. on the fourth Sunday in March of every year with the third Sunday used as the alternate day, if the fourth Sunday falls on a religious holiday.

Grassy Sound Channel

This proposed rule amends 33 CFR 117.721 which details the operating regulations for the Grassy Sound Channel Bridge. Section 117.721 will be revised to allow the Grassy Sound Channel Bridge to remain in the closed-to-navigation position from 9:15 a.m. to 2:30 p.m. on the fourth Sunday in March of every year with the third Sunday used as the alternate day, if the fourth Sunday falls on a religious holiday.

New Jersey Intracoastal Waterway

This proposed rule amends 33 CFR 117.733 by redesignating paragraph (k) as paragraph (m) and adding new paragraph (k) which details the operating regulations for the Two-Mile Bridge, at mile 112.2, across Middle Thorofare in Wildwood Crest.

A new paragraph (k) will be added to § 117.733, which allows the Two-Mile Bridge to remain in the closed-to-navigation position from 9:15 a.m. to 10:30 a.m. on the fourth Sunday in March of every year with the third Sunday used as the alternate day, if the fourth Sunday falls on a religious holiday.

Tuckahoe River

Section 117.757 Tuckahoe River will be redesignated as § 117.758 to allow alphabetical placement and codification of Townsend Inlet at § 117.757.

Townsend Inlet

Townsend Inlet will be added at new § 117.757, detailing the operating regulations and allowing the Townsend Inlet Bridge to remain in the closed-to-navigation position from 9:15 a.m. to 2:30 p.m. on the fourth Sunday in March of every year with the third Sunday used as the alternate day, if the fourth Sunday falls on a religious holiday.

Regulatory Evaluation

This proposed rule is not a ''significant regulatory action'' under section 3(f) of Executive Order 12866, Regulatory Planning, and Review, and does not require an assessment of potential costs and benefits under section 6(a)(3) of that Order. The Office of Management and Budget has not reviewed it under that Order. It is not ''significant'' under the regulatory policies and procedures of the Department of Homeland Security (DHS).

We expect the economic impact of this proposed rule to be so minimal that a full Regulatory Evaluation under the regulatory policies and procedures of DHS is unnecessary. We reached this conclusion based on the fact that the proposed changes have only a minimal impact on maritime traffic transiting the bridge. Mariners can plan their trips in accordance with the scheduled bridge openings to minimize delays.

Small Entities

Under the Regulatory Flexibility Act (5 U.S.C. 601–612), we have considered whether this proposed rule would have a significant economic impact on a substantial number of small entities. The term ''small entities'' comprises small businesses, not-for-profit organizations that are independently owned and operated and are not dominant in their fields, and governmental jurisdictions with populations of less than 50,000.

The Coast Guard certifies under 5 U.S.C. 605(b) that this proposed rule would not have a significant economic impact on a substantial number of small entities.

This proposed rule would not have a significant economic impact on a substantial number of small entities because the rule only adds minimal restrictions to the movement of navigation, and mariners who plan their transits in accordance with the scheduled bridge openings can minimize delay.

If you think that your business, organization, or governmental jurisdiction qualifies as a small entity and that this rule would have a significant economic impact on it, please submit a comment (see **ADDRESSES**) explaining why you think it qualifies and how and to what degree this rule would economically affect it.

Assistance for Small Entities

Under section 213(a) of the Small Business Regulatory Enforcement Fairness Act of 1996 (Pub. L. 104–121), we want to assist small entities in understanding this proposed rule so that they can better evaluate its effects on them and participate in the rulemaking. If the rule would affect your small business, organization, or governmental jurisdiction and you have questions concerning its provisions or options for compliance, please contact Waverly W. Gregory, Jr., Bridge Administrator, Fifth Coast Guard District, (757) 398–6222. The Coast Guard will not retaliate against small entities that question or complain about this rule or any policy or action of the Coast Guard.

Collection of Information

This proposed rule would call for no new collection of information under the Paperwork Reduction Act of 1995 (44 U.S.C. 3501–3520).

Federalism

A rule has implications for federalism under Executive Order 13132, Federalism, if it has a substantial direct effect on State or local governments and would either preempt State law or impose a substantial direct cost of compliance on them. We have analyzed this proposed rule under that Order and have determined that it does not have implications for federalism.

Unfunded Mandates Reform Act

The Unfunded Mandates Reform Act of 1995 (2 U.S.C. 1531–1538) requires Federal agencies to assess the effects of their discretionary regulatory actions. In particular, the Act addresses actions that may result in the expenditure by a State, local, or tribal government, in the aggregate, or by the private sector of $100,000,000 or more in any one year. Though this proposed rule will not result in such an expenditure, we do discuss the effects of this rule elsewhere in this preamble.

Taking of Private Property

This proposed rule would not affect a taking of private property or otherwise have taking implications under Executive Order 12630, Governmental Actions and Interference with Constitutionally Protected Property Rights.

Civil Justice Reform

This proposed rule meets applicable standards in sections 3(a) and 3(b)(2) of Executive Order 12988, Civil Justice Reform, to minimize litigation, eliminate ambiguity, and reduce burden.

Protection of Children

We have analyzed this proposed rule under Executive Order 13045, Protection of Children from Environmental Health Risks and Safety Risks. This rule is not an economically significant rule and would not create an environmental risk to health or risk to safety that might disproportionately affect children.

Indian Tribal Governments

This proposed rule does not have tribal implications under Executive Order 13175, Consultation and Coordination with Indian Tribal Governments, because it would not have a substantial direct effect on one or more Indian tribes, on the relationship between the Federal Government and Indian tribes, or on the distribution of power and responsibilities between the Federal Government and Indian tribes.

Energy Effects

We have analyzed this proposed rule under Executive Order 13211, Actions Concerning Regulations That Significantly Affect Energy Supply, Distribution, or Use. We have determined that it is not a ''significant energy action'' under that order because it is not a ''significant regulatory action'' under Executive Order 12866 and is not likely to have a significant adverse effect on the supply, distribution, or use of energy. The Administrator of the Office of Information and Regulatory Affairs has not designated it as a significant energy action. Therefore, it does not require a Statement of Energy Effects under Executive Order 13211.

Technical Standards

The National Technology Transfer and Advancement Act (NTTAA) (15 U.S.C. 272 note) directs agencies to use voluntary consensus standards in their regulatory activities unless the agency provides Congress, through the Office of Management and Budget, with an explanation of why using these standards would be inconsistent with applicable law or otherwise impractical. Voluntary consensus standards are technical standards (e.g., specifications of materials, performance, design, or operation; test methods; sampling procedures; and related management systems practices) that are developed or adopted by voluntary consensus standards bodies.

This proposed rule does not use technical standards. Therefore, we did not consider the use of voluntary consensus standards.

Environment

We have analyzed this proposed rule under Commandant Instruction M16475.lD and Department of Homeland Security Management Directive 5100.1, which guide the Coast Guard in complying with the National Environmental Policy Act of 1969 (NEPA) (42 U.S.C. 4321–4370f), and have made a preliminary determination that there are no factors in this case that would limit the use of a categorical exclusion under section 2.B.2 of the Instruction. Therefore, we believe that this proposed rule should be categorically excluded, under figure 2–1, paragraph (32)(e) of the Instruction, from further environmental documentation. Under figure 2–1, paragraph (32)(e), of the Instruction, an ''Environmental Analysis Check List'' is not required for this rule. Comments on this section will be considered before we make the final decision on whether to categorically exclude this rule from further environmental review.

List of Subjects in 33 CFR Part 117

Bridges.

Regulations

For the reasons discussed in the preamble, the Coast Guard proposes to amend 33 CFR part 117 as follows:

PART 117—DRAWBRIDGE OPERATION REGULATIONS

1. The authority citation for part 117 continues to read as follows:

Authority: 33 U.S.C. 499; Department of Homeland Security Delegation No. 0170.1; 33 CFR 1.05–1(g); section 117.255 also issued under the authority of Pub. L. 102–587, 106 Stat. 5039.

2. Section 117.720 is amended by adding a new paragraph (c) to read as follows:

§ 117.720 Great Channel.

* * * * *

(c) From 9:15 a.m. to 2:30 p.m. on the fourth Sunday in March of every year, the draw need not open for vessels. If the fourth Sunday falls on a religious holiday, the draw need not open from 9:15 a.m. to 2:30 p.m. on the third Sunday of March of every year.

3. Section 117.721 is revised to read as follows:

§ 117.721 Grassy Sound Channel.

The draw of the Grassy Sound Channel Bridge, mile 1.0 in Middle Township, shall open on signal from 6 a.m. to 8 p.m. from May 15 through September 30. From 9:15 a.m. to 2:30 p.m. on the fourth Sunday in March of every year, the draw need not open for vessels. If the fourth Sunday falls on a religious holiday, the draw need not open from 9:15 a.m. to 2:30 p.m. on the third Sunday of March of every year. Two hours advance notice is required for all other openings by calling (609) 368–4591.

4. Section 117.733 is amended by redesignating paragraph (k) as paragraph (m) and adding a new paragraph (k) to read as follows:

§ 117.733 New Jersey Intracoastal Waterway.

* * * * *

(k) The draw of Two-Mile Bridge, mile 112.2, across Middle Thorofare in Wildwood Crest, shall open on signal; except from 9:15 a.m. to 10:30 a.m. on the fourth Sunday in March of every year, the draw need not open for vessels. If the fourth Sunday falls on a religious holiday, the draw need not open for vessels from 9:15 a.m. to 10:30 a.m. on the third Sunday of March of every year.

* * * * *

§ 117.757 [Redesignated]

5. Redesignate § 117.757 as § 117.758.

6. Add new § 117.757 to read as follows:

§ 117.757 Townsend Inlet.

The draw of Townsend Inlet Bridge, mile 0.3 in Avalon, shall open on signal; except from 9:15 a.m. to 2:30 p.m. on the fourth Sunday in March of every year, the draw need not open for vessels. If the fourth Sunday falls on a religious holiday, the draw need not open from 9:15 a.m. to 2:30 p.m. on the third Sunday of March of every year.

Dated: June 16, 2006.

Larry L. Hereth,

Rear Admiral, U.S. Coast Guard, Commander, Fifth Coast Guard District.

[FR Doc. E6–10249 Filed 6–28–06; 8:45 am]

BILLING CODE 4910–15–P

DEPARTMENT OF HOMELAND SECURITY

Coast Guard

33 CFR Part 117

[CGD05–06–044]

RIN 1625–AA09

Drawbridge Operation Regulations; Broad Creek, Cedar Creek, and Nanticoke River, DE

AGENCY: Coast Guard, DHS.

ACTION: Notice of proposed rulemaking.

SUMMARY: The Coast Guard proposes to change the drawbridge operation

regulations of four Delaware Department of Transportation (DelDOT) bridges: The Poplar Street Bridge, at mile 8.2, and the US 13A Bridge, at mile 8.2, both across Broad Creek in Laurel, DE; the SR 36 Bridge, at mile 0.5, over Cedar Creek in Cedar Beach; and SR 13 Bridge, at mile 39.6, across Nanticoke River in Seaford, DE. This proposal would allow the bridges to open on signal if advance notice is given at different times from 4 to 48 hours. This proposal will eliminate the continual attendance of draw tender services during the non-peak boating periods while still providing the reasonable needs of navigation.

DATES: Comments and related material must reach the Coast Guard on or before August 14, 2006.

ADDRESSES: You may mail comments and related material to Commander (dpb), Fifth Coast Guard District, Federal Building, 1st Floor, 431 Crawford Street, Portsmouth, VA 23704–5004. The Fifth Coast Guard District maintains the public docket for this rulemaking. Comments and material received from the public, as well as documents indicated in this preamble as being available in the docket, will become part of this docket and will be available for inspection or copying at Commander (dpb), Fifth Coast Guard District between 8 a.m. and 4 p.m., Monday through Friday, except Federal holidays.

FOR FURTHER INFORMATION CONTACT: Waverly W. Gregory, Jr., Bridge Administrator, Fifth Coast Guard District, at (757) 398–6222.

SUPPLEMENTARY INFORMATION:

Request for Comments

We encourage you to participate in this rulemaking by submitting comments and related material. If you do so, please include your name and address, identify the docket number for this rulemaking CGD05–06–044, indicate the specific section of this document to which each comment applies, and give the reason for each comment. Please submit all comments and related material in an unbound format, no larger than 8½ by 11 inches, suitable for copying. If you would like a return receipt, please enclose a stamped, self-addressed postcard or envelope. We will consider all submittals received during the comment period. We may change this proposed rule in view of them.

Public Meeting

We do not now plan to hold a public meeting. But you may submit a request for a meeting by writing to Commander (dpb), Fifth Coast Guard District at the address under **ADDRESSES** explaining why one would be beneficial. If we determine that one would aid this rulemaking, we will hold one at a time and place announced by a later notice in the **Federal Register**.

Background and Purpose

DelDOT, who owns and operates the Poplar Street Bridge and the US 13A Bridge, at mile 8.2, both across Broad Creek in Laurel; the SR 36 Bridge, at mile 0.5, over Cedar Creek in Cedar Beach; and the SR 13 Bridge, at mile 39.6, across Nanticoke River in Seaford, requested advance notification for vessel openings and a reduction in draw tender services for the following explanations:

Broad Creek

In the closed-to-navigation position, the Poplar Street Bridge, mile 8.2, and the US 13A Bridge, mile 8.2, both in Laurel, have vertical clearances of five feet and two feet, above mean high water, and eight feet and five feet, above mean low water, respectively. The existing operating regulations for these drawbridges are set out in 33 CFR 117.233, which requires the bridges, along with the Conrail Bridge (at mile 8.0) in Laurel, to open on signal if at least four hours notice is given.

DelDOT provided information to the Coast Guard about the conditions and reduced operational capabilities of the draw spans. Due to the infrequency of requests for vessel openings of the drawbridge for the past 10 years, DelDOT requested to change the current operating regulations by requiring the draw spans to open on signal if at least 48 hours notice is given year-round.

Cedar Creek

The SR 36 Bridge, at mile 0.5 in Cedar Beach, has a vertical clearance of two feet, above mean high water, and six feet, above mean low water, in the closed-to-navigation position. The existing regulation is listed at 33 CFR 117.5, which requires the bridge to open on signal.

Bridge opening data submitted by DelDOT revealed significantly fewer openings at certain hours of the night in the spring and summer months; and during the fall and winter months. The bridge logs also show the majority of drawbridge openings were performed year-round between the hours of 6 a.m. and 6:30 p.m. The proposed change will require the draw to open on signal from April 1 through November 30, except from 2 a.m. to 4 a.m., when at least four hours notice must be given. From 6 a.m. to 6:30 p.m., from December 1 through March 31, the draw would open on signal. At all other times, the draw would open on signal if at least four hours notice is given.

These changes are being requested to reduce bridge tender services required at the SR 36 Bridge due to the decrease in vessel opening requests.

Nanticoke River

The SR 13 Bridge, at mile 39.6, in Seaford has a vertical clearance of three feet, above mean high water and seven feet, above mean low water in the closed-to-navigation position. The existing regulation is listed at 33 CFR 117.5, which requires the bridge to open on signal.

Bridge opening data submitted by DelDOT revealed significantly fewer openings between the hours of 8 a.m. and 6 p.m. in the spring and summer months; and on weekdays in the fall and winter months.

The proposed change would require the draw to open on signal from 8 a.m. to 6 p.m. from April 1 through October 31; and at all other times, if at least four hours notice is given. From 7:30 a.m. to 3 p.m., from November 1 through March 31, on weekends (Saturdays and Sundays), the draw would open on signal; and at all other times, if at least four hours notice is given.

These changes are being requested to reduce bridge tender services required at the SR 13 Bridge due to the decrease in vessel opening requests.

Discussion of Proposed Rule

Broad Creek

The Coast Guard proposes to revise 33 CFR 117.233, which governs the Conrail Bridge, mile 8.0, the Poplar Street bridge, mile 8.2 and the US 13A bridge, mile 8.2, all in Laurel.

The current paragraph would be divided into paragraphs (a) and (b). Paragraph (a) would contain the existing rule for the Conrail Bridge, mile 8.0, in Laurel and would state that the draw shall open on signal if at least four hours notice is given.

Paragraph (b) would contain the proposed rules for the Poplar Street Bridge, mile 8.2 and the US 13A Bridge, mile 8.2, both in Laurel. The proposals would require the drawbridges to open on signal if at least 48 hours notice is given.

Cedar Creek

A new section, 117.234, would be inserted to allow SR 36 Bridge, mile 0.5 in Cedar Beach, to open on signal from April 1 through November 30, except from 2 a.m. to 4 a.m., if at least four hours notice is given.

From December 1 through March 31, from 6 a.m. to 6:30 p.m., the draw would open on signal; and at all other times, if at least four hours notice is given.

Nanticoke River

In 33 CFR 117.243, this proposed rule redesignate paragraphs (a) through (c) as paragraph (a)(1) through (a)(3). The redesignated paragraph (a) would contain the existing rules for the Norfolk Southern Railway Bridge, mile 39.4, at Seaford. The contact information for advance notice at the Norfolk Southern Railway Bridge would be changed to the ''train dispatcher'' vice ''bridge tender'' and the new telephone numbers at (717) 215–0379 or (609) 412–4338.

The redesignated paragraph (b) would contain the proposed rules for the SR 13 Bridge, mile 39.6, in Seaford. The proposed rule would require the draw to open on signal from 8 a.m. to 6 p.m. from April 1 through October 31; and at all other times, if at least four hours notice is given. From 7:30 a.m. to 3 p.m., from November 1 through March 31, on weekends (Saturdays and Sundays), the draw would open on signal; and at all other times, if at least four hours notice is given.

Text modifications to be consistent with other proposed changes would be made in these paragraphs, as appropriate.

Regulatory Evaluation

This proposed rule is not a ''significant regulatory action'' under section 3(f) of Executive Order 12866, Regulatory Planning, and Review, and does not require an assessment of potential costs and benefits under section 6(a)(3) of that Order. The Office of Management and Budget has not reviewed it under that Order. It is not ''significant'' under the regulatory policies and procedures of the Department of Homeland Security (DHS).

We expect the economic impact of this proposed rule to be so minimal that a full Regulatory Evaluation under the regulatory policies and procedures of DHS is unnecessary. We reached this conclusion based on the fact that the proposed changes have only a minimal impact on maritime traffic transiting the bridge. Mariners can plan their trips in accordance with the proposed scheduled bridge openings, to minimize delays.

Small Entities

Under the Regulatory Flexibility Act (5 U.S.C. 601–612), we have considered whether this proposed rule would have a significant economic impact on a substantial number of small entities. The term ''small entities'' comprises small businesses, not-for-profit organizations that are independently owned and operated and are not dominant in their fields, and governmental jurisdictions with populations of less than 50,000.

The Coast Guard certifies under 5 U.S.C. 605(b) that this proposed rule would not have a significant economic impact on a substantial number of small entities.

This proposed rule would not have a significant economic impact on a substantial number of small entities because the rule only adds minimal restrictions to the movement of navigation, and mariners who plan their transits in accordance with the proposed scheduled bridge openings can minimize delay.

If you think that your business, organization, or governmental jurisdiction qualifies as a small entity and that this rule would have a significant economic impact on it, please submit a comment (see **ADDRESSES**) explaining why you think it qualifies and how and to what degree this rule would economically affect it.

Assistance for Small Entities

Under section 213(a) of the Small Business Regulatory Enforcement Fairness Act of 1996 (Public Law 104–121), we want to assist small entities in understanding this proposed rule so that they can better evaluate its effects on them and participate in the rulemaking. If the rule would affect your small business, organization, or governmental jurisdiction and you have questions concerning its provisions or options for compliance, please contact Waverly W. Gregory, Jr., Bridge Administrator, Fifth Coast Guard District, and (757) 398–6222. The Coast Guard will not retaliate against small entities that question or complain about this rule or any policy or action of the Coast Guard.

Collection of Information

This proposed rule would call for no new collection of information under the Paperwork Reduction Act of 1995 (44 U.S.C. 3501–3520).

Federalism

A rule has implications for federalism under Executive Order 13132, Federalism, if it has a substantial direct effect on State or local governments and would either preempt State law or impose a substantial direct cost of compliance on them. We have analyzed this proposed rule under that Order and have determined that it does not have implications for federalism.

Unfunded Mandates Reform Act

The Unfunded Mandates Reform Act of 1995 (2 U.S.C. 1531–1538) requires Federal agencies to assess the effects of their discretionary regulatory actions. In particular, the Act addresses actions that may result in the expenditure by a State, local, or tribal government, in the aggregate, or by the private sector of $100,000,000 or more in any one year. Though this proposed rule will not result in such an expenditure, we do discuss the effects of this rule elsewhere in this preamble.

Taking of Private Property

This proposed rule would not effect a taking of private property or otherwise have taking implications under Executive Order 12630, Governmental Actions and Interference with Constitutionally Protected Property Rights.

Civil Justice Reform

This proposed rule meets applicable standards in sections 3(a) and 3(b)(2) of Executive Order 12988, Civil Justice Reform, to minimize litigation, eliminate ambiguity, and reduce burden.

Protection of Children

We have analyzed this proposed rule under Executive Order 13045, Protection of Children from Environmental Health Risks and Safety Risks. This rule is not an economically significant rule and would not create an environmental risk to health or risk to safety that might disproportionately affect children.

Indian Tribal Governments

This proposed rule does not have tribal implications under Executive Order 13175, Consultation and Coordination with Indian Tribal Governments, because it would not have a substantial direct effect on one or more Indian tribes, on the relationship between the Federal Government and Indian tribes, or on the distribution of power and responsibilities between the Federal Government and Indian tribes.

Energy Effects

We have analyzed this proposed rule under Executive Order 13211, Actions Concerning Regulations That Significantly Affect Energy Supply, Distribution, or Use. We have determined that it is not a ''significant energy action'' under that order because it is not a ''significant regulatory action'' under Executive Order 12866 and is not likely to have a significant adverse effect on the supply, distribution, or use of energy. The Administrator of the Office

of Information and Regulatory Affairs has not designated it as a significant energy action. Therefore, it does not require a Statement of Energy Effects under Executive Order 13211.

Technical Standards

The National Technology Transfer and Advancement Act (NTTAA) (15 U.S.C. 272 note) directs agencies to use voluntary consensus standards in their regulatory activities unless the agency provides Congress, through the Office of Management and Budget, with an explanation of why using these standards would be inconsistent with applicable law or otherwise impractical. Voluntary consensus standards are technical standards (*e.g.*, specifications of materials, performance, design, or operation; test methods; sampling procedures; and related management systems practices) that are developed or adopted by voluntary consensus standards bodies.

This proposed rule does not use technical standards. Therefore, we did not consider the use of voluntary consensus standards.

Environment

We have analyzed this proposed rule under Commandant Instruction M16475.lD and Department of Homeland Security Management Directive 5100.1, which guide the Coast Guard in complying with the National Environmental Policy Act of 1969 (NEPA) (42 U.S.C. 4321–4370f), and have made a preliminary determination that there are no factors in this case that would limit the use of a categorical exclusion under section 2.B.2 of the Instruction. Therefore, we believe that this rule should be categorically excluded, under figure 2–1, paragraph (32)(e), of the Instruction, from further environmental documentation. Under figure 2–1, paragraph (32)(e), of the Instruction, an ''Environmental Analysis Check List'' is not required for this rule. Comments on this section will be considered before we make the final decision on whether to categorically exclude this rule from further environmental review.

List of Subjects in 33 CFR Part 117

Bridges.

Regulations

For the reasons discussed in the preamble, the Coast Guard proposes to amend 33 CFR part 117 as follows:

PART 117—DRAWBRIDGE OPERATION REGULATIONS

1. The authority citation for part 117 continues to read as follows:

Authority: 33 U.S.C. 499; Department of Homeland Security Delegation No. 0170.1; 33 CFR 1.05–1(g); section 117.255 also issued under the authority of Pub. L. 102–587, 106 Stat. 5039.

2. Revise § 117.233 to read as follows:

§ 117.233 Broad Creek.

(a) The draw of the Conrail Bridge, mile 8.0 at Laurel, shall open on signal if at least four hours notice is given.

(b) The draws of the Poplar Street Bridge, mile 8.2, and the US 13A Bridge, mile 8.2, all at Laurel, shall open on signal if at least 48 hours notice is given.

3. Add new § 117.234 to read as follows:

§ 117.234 Cedar Creek.

The SR 36 Bridge, mile 0.5 in Cedar Beach, shall open on signal; except that from April 1 through November 30 from 2 a.m. to 4 a.m.; and from December 1 through March 31 from 6:30 p.m. to 6 a.m., the draw shall open on signal if at least four hours notice is given.

4. Revise § 117.243 to read as follows:

§ 117.243 Nanticoke River.

(a) The draw of the Norfolk Southern Railway Bridge, mile 39.4 in Seaford, will operate as follows:

(1) From March 15 through November 15, the draw will open on signal for all vessels except that from 11 p.m. to 5 a.m. at least 2½ hours notice will be required.

(2) At all times, from November 16 through March 14, the draw will open on signal if at least 2½ hours notice is given.

(3) When notice is required, the owner operator of the vessel must provide the train dispatcher with an estimated time of passage by calling (717) 215–0379 or (609) 412–4338.

(b) The draw of the SR 13 Bridge, mile 39.6 in Seaford, shall open on signal, except that from April 1 through October 31, from 6 p.m. to 8 a.m.; and from November 1 through March 31, Monday to Friday; and from November 1 through March 31, on Saturday and Sunday, from 3:30 p.m. to 7:30 a.m., the draw shall open on signal if at least four hours notice is given.

Dated: June 16, 2006.

Larry L. Hereth,

Rear Admiral, U.S. Coast Guard, Commander, Fifth Coast Guard District.

[FR Doc. E6–10247 Filed 6–28–06; 8:45 am]

BILLING CODE 4910–15–P

DEPARTMENT OF VETERANS AFFAIRS

38 CFR Part 3

RIN 2900–AM28

Accrued Benefits

AGENCY: Department of Veterans Affairs.

ACTION: Proposed rule.

SUMMARY: The Department of Veterans Affairs (VA) proposes to amend its adjudication regulation regarding accrued benefits. The amendments are the result of changes in statute and to clarify existing regulatory provisions.

DATES: Comments must be received by VA on or before August 28, 2006.

ADDRESSES: Written comments may be submitted by: mail or hand-delivery to the Director, Regulations Management (00REG1), Department of Veterans Affairs, 810 Vermont Ave., NW., Room 1068, Washington, DC 20420; fax to (202) 273–9026; or e-mail through *www.Regulations.gov*. Comments should indicate that they are submitted in response to ''RIN 2900–AM28.'' All comments received will be available for public inspection in the Office of Regulation Policy and Management, Room 1063B, between the hours of 8 a.m. and 4:30 p.m., Monday through Friday (except holidays). Please call (202) 273–9515 for an appointment.

FOR FURTHER INFORMATION CONTACT: Maya Ferrandino, Consultant, Policy and Regulations Staff, Compensation and Pension Service, Veterans Benefits Administration, Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420, (202) 273–7211.

SUPPLEMENTARY INFORMATION: Section 104 of the Veterans Benefits Act of 2003 (the ''Act''), Public Law 108–183, amended 38 U.S.C. 5121, which addresses payment of certain accrued benefits upon the death of a beneficiary. To ensure consistency with statutory changes and for clarification purposes, VA proposes to amend its regulations regarding accrued benefits.

Prior to its amendment by section 104 of the Act, the introductory portion of 38 U.S.C. 5121(a) read as follows:

> Except as provided in sections 3329 and 3330 of title 31, periodic monetary benefits (other than insurance and servicemen's indemnity) under laws administered by the Secretary to which an individual was entitled at death under existing ratings or decisions, or those based on evidence in the file at date of death (hereinafter in this section and section 5122 of this title referred to as ''accrued benefits'') and due and unpaid for a period not to exceed two years, shall, upon the death of such individual be paid as follows * * *.

38 U.S.C. 5121(a) (2002).

VA traditionally construed 38 U.S.C. 5121(a) as providing only one type of benefit to survivors: Accrued benefits. The United States Court of Appeals for Veterans Claims (CAVC) in *Bonny* v. *Principi,* 16 Vet. App. 504 (2002), interpreted section 5121(a) differently. The CAVC's analysis includes the following:

> The comma in the middle of paragraph (a), between ''decisions'' and ''or,'' and the use of the conjunction ''or'' after the comma, indicate that the separated phrases state substantive alternatives. 38 U.S.C. 5121(a). The paragraph provides for payment of (1) periodic monetary benefits to which an individual was entitled at death under existing ratings or decisions, which the Court will call ''benefits awarded but unpaid'', or (2) periodic monetary benefits based on evidence in the file at the date of an entitled individual's death and due and unpaid for a period not to exceed two years, which are called ''accrued benefits'' for purposes of sections 5121 and 5122. *Id.*
>
> * * * * *
>
> The important distinction between the two types of periodic monetary benefits is that one type of benefits is due to be paid to the veteran at his death and one type is not. As to the former, when the benefits have been awarded but not paid pre-death, an eligible survivor is to receive the entire amount of the award. The right to receive the entire amount of periodic monetary benefits that was awarded to the eligible individual shifts to the eligible survivor when payment of the award was not made before the eligible individual died. This interpretation of 38 U.S.C. 5121(a) is completely consistent with the plain language of the statute, as previously quoted and interpreted herein.
>
> As to the latter type of periodic monetary benefits, what is determinative regarding accrued benefits is that evidence in the individual's file at the date of death supports a decision in favor of awarding benefits. Because the benefits cannot be awarded to the deceased individual, an eligible survivor can claim a portion of those accrued benefits.

Bonny, 16 Vet. App. at 507–08. The CAVC's analysis recognized two kinds of benefits under 38 U.S.C. 5121, which the court called ''accrued benefits'' and ''benefits awarded but unpaid.''

Section 104(a) of the Act removed the two-year limitation on accrued benefits payable under 38 U.S.C. 5121. Section 104(c) of the Act made ''technical amendments'' to 38 U.S.C. 5121, including removal of the comma after ''or decisions'' in the introductory text of paragraph (a). This is the same comma relied upon by the CAVC in *Bonny* for interpreting 38 U.S.C. 5121 to require a distinction between accrued benefits and ''benefits awarded but unpaid.'' Therefore, an important question is whether Congress intended to change the interpretation of 38 U.S.C. 5121 required by the *Bonny* decision by removing this comma. Based on the following analysis, we believe that it did.

The Act resulted from enactment of House bill H.R. 2297, as amended, 108th Cong. (2003). The ''Explanatory Statement on Senate Amendment to House Bill, H.R. 2297, as Amended'' notes that the Act reflects a compromise agreement reached by the House and Senate Committees on Veterans' Affairs on provisions of a number of House and Senate bills affecting veterans' benefits. Section 104 of the Act was based on portions of two of these bills, section 6 of H.R. 1460, 108th Cong. (2003), and section 105 of S. 1132, as amended, 108th Cong. (2003). *See* 149 Cong. Rec. S15,133–34 (daily ed. Nov. 19, 2003).

The removal of the comma in question in 38 U.S.C. 5121(a) comes from section 105(b) of S. 1132, as passed by the Senate. *See* 149 Cong. Rec. S13,745 (daily ed. Oct. 31, 2003). S. 1132 was also based on a number of other bills, including S. 1188, 108th Cong. (2003). A principal purpose of S. 1188 was to amend 38 U.S.C. 5121 ''to repeal the two-year limitation on the payment of accrued benefits that are due and unpaid by the Secretary of Veterans Affairs upon the death of a veteran or other beneficiary under laws administered by the Secretary.'' 149 Cong. Rec. S7,476 (daily ed. June 5, 2003). As originally drafted, S. 1188 did not include the ''technical amendments'' in section 104(c) of the Act.

On July 10, 2003, the Senate Committee on Veterans' Affairs held a hearing on a number of the bills that would become the sources of S. 1132. Persons who testified at that hearing included Daniel L. Cooper, VA's Under Secretary for Benefits, whose statement to the Committee included the following comment concerning S. 1188:

> In addition, we note one technical change needed in section 2 of S. 1188 should it be enacted. The comma in current section 5121(a) following ''existing ratings or decisions'' should be deleted to clarify, for purposes of 38 U.S.C. 5121(b) and (c) and 5122, that the term ''accrued benefits'' includes both benefits that have been awarded to an individual in existing ratings or decisions but not paid before the individual's death, as well as benefits that could be awarded based on evidence in the file at the date of death.

S. Rep. No. 108–169, at 46–47 (2003).

Further, in its discussion of section 105 of S. 1132, the Committee noted that:

> At the Committee's hearing on July 10, 2003, Under Secretary Cooper commented as follows: ''The distinction the *Bonny* decision draws between the two categories of claimants—those whose claims had been approved and those whose entitlement had yet to be recognized when they died—is really one without a difference. In either case, a claimant's estate is deprived of the value of benefits to which the claimant was, in life, entitled.''

Id. at 8.

Based on this legislative history, we conclude that Congress' purpose in removing the comma from the introductory paragraph of 38 U.S.C. 5121(a) was to provide for only one type of benefit under section 5121, removing the distinction between accrued benefits and ''benefits awarded but unpaid'' that resulted from the *Bonny* decision.

The interplay between *Bonny* and section 104 of the Act is also affected by the fact that different portions of section 104 of the Act became effective at different times. Because there is no specific effective date in the Act for section 104(c) (the ''technical amendments'' which include removal of the comma that was a basis for the CAVC's interpretation of 38 U.S.C. 5121 in *Bonny*), that portion of the Act became effective when the Act was signed into law on December 16, 2003. On the other hand, under section 104(d) of the Act, the amendment to 38 U.S.C. 5121(a) removing the provision restricting benefits to those that were due and unpaid ''for a period not to exceed two years'' applies to deaths occurring on or after December 16, 2003.

These factors lead to consideration of what, if any, viability the *Bonny* distinctions between accrued benefits and ''benefits awarded but unpaid'' still have. For the reasons discussed in the following paragraphs, we conclude that these distinctions are still applicable in a very limited number of cases. Particularly because of the differences in effective date provisions for different provisions of section 104 of the Act, sorting this out involves looking at the time line for when the deceased beneficiary died and when claims for 38 U.S.C. 5121 benefits were received and decided.

Based on the plain language of the Act, we believe the *Bonny* division of 38 U.S.C. 5121 benefits clearly does not apply if the deceased beneficiary died on or after December 16, 2003. Effective on that date, the statutory basis for *Bonny*'s interpretation of 38 U.S.C. 5121 as creating two different types of VA benefits was removed. In any event, there would be little benefit to claimants for preserving the distinction in such cases because the two-year benefit limitation has been repealed in cases where the deceased beneficiary died on or after December 16, 2003.

For claims filed on or after December 16, 2003, VA must apply 38 U.S.C. 5121 as amended by the Act. However, the two-year limitation applies to all 38 U.S.C. 5121 accrued benefit claims VA received on or after December 16, 2003, if the deceased beneficiary died before December 16, 2003. This is true because (1) the Act removed the statutory underpinnings of the *Bonny* decision effective on December 16, 2003, but (2) Congress very clearly intended the removal of the two-year limitation in amended 38 U.S.C. 5121 to be effective only where the deceased beneficiary died on or after December 16, 2003.

The last question is how VA should apply 38 U.S.C. 5121 to cases where the deceased beneficiary died before December 16, 2003, and a claim for section 5121 benefits was pending on December 16, 2003. We propose that the Act's amendments do not apply in such cases.

VA's General Counsel addressed retroactive application of a new statute in VAOPGCPREC 7–2003 (2003), holding:

> In *Kuzma* v. *Principi*, 341 F.3d 1327 (Fed. Cir. 2003), the United States Court of Appeals for the Federal Circuit [(Federal Circuit)] overruled *Karnas* v. *Derwinski,* 1 Vet. App. 308 (1991), to the extent it conflicts with the precedents of the Supreme Court and the Federal Circuit. *Karnas* is inconsistent with Supreme Court and Federal Circuit precedent insofar as *Karnas* provides that, when a statute or regulation changes while a claim is pending before [VA] or a court, whichever version of the statute or regulation is most favorable to the claimant will govern unless the statute or regulation clearly specifies otherwise. Accordingly, that rule adopted in *Karnas* no longer applies in determining whether a new statute or regulation applies to a pending claim. Pursuant to Supreme Court and Federal Circuit precedent, when a new statute is enacted or a new regulation is issued while a claim is pending before VA, VA must first determine whether the statute or regulation identifies the types of claims to which it applies. If the statute or regulation is silent, VA must determine whether applying the new provision to claims that were pending when it took effect would produce genuinely retroactive effects. If applying the new provision would produce such retroactive effects, VA ordinarily should not apply the new provision to the claim. If applying the new provision would not produce retroactive effects, VA ordinarily must apply the new provision.

As to the first criterion, with respect to the technical corrections in section 104(c), the Act does not ''identif[y] the types of claims to which it applies.'' The question then becomes whether applying the Act's provisions to claims pending before VA on December 16, 2003, would produce a ''genuinely retroactive'' effect. For the reasons stated below, we believe that it would. Therefore, VA will not apply the Act's amendments to claims for 38 U.S.C. 5121 benefits pending before VA on December 16, 2003.

Determining whether applying changes in the law would produce a genuinely retroactive effect is a complex undertaking. However, as discussed in VAOPGCPREC 7–2003:

> [S]tatutes or regulations that restrict the bases for entitlement to a benefit might have disfavored retroactive effects as applied to some claims that were pending when they took effect. For example, if a veteran was entitled to benefits based on the law existing when he or she filed an application with VA, and a restrictive change in the governing law occurs before VA adjudicates the claim, application of the new restriction might retroactively extinguish the claimant's previously existing right to benefits for periods before the new law took effect. In those circumstances, *Landgraf* [v. *USI Film Products,* 511 U.S. 244 (1994),] indicates that the intervening restriction would not apply in determining the claimant's rights for such periods.

We believe that these principles control the question at hand and call for application of 38 U.S.C. 5121 as it existed prior to the Act to claims pending on December 16, 2003.

VA has not contested the holding in *Bonny* and we thus conclude that *Bonny* states the governing interpretation of 38 U.S.C. 5121 prior to the amendments made by the Act. Applying the technical amendment to section 5121(a) made by the Act to pending claims would limit the amount of benefits some claimants could receive under section 5121(a) subsequent to the *Bonny* decision and prior to enactment of the Act. That is, a claimant who had a claim for ''benefits awarded but unpaid'' pending on December 16, 2003, would be limited to two years of benefits because the technical amendment of the Act eliminated the *Bonny* division of section 5121(a) benefits and the removal of the two-year limitation applies only in cases in which the deceased beneficiary died on or after December 16, 2003. We believe this would constitute a genuine retroactive effect.

We propose to amend § 3.1000 to reflect the changes to section 5121 made by the Act. As this proposed regulation will be published more than one year after the effective dates prescribed in the Act, we propose not to include information regarding the effective dates in the regulation itself. If the beneficiary died prior to December 16, 2003, and a claim for benefits under 38 U.S.C. 5121 was pending as of December 16, 2003, the claim will be adjudicated under the provisions of § 3.1000, and the VA regulations cited therein, in effect on December 16, 2003. If the beneficiary died prior to December 16, 2003, but VA received a claim for benefits under 38 U.S.C. 5121 on or after December 16, 2003, the claim will be adjudicated under the proposed provisions of § 3.1000, except that the two-year limitation will continue to apply. This is because the basis for the *Bonny* court's interpretation of 38 U.S.C. 5121(a) is no longer viable as of December 16, 2003, but the removal of the two-year limitation is effective only where the beneficiary died on or after December 16, 2003.

To summarize, there are now three potential groups of claimants for accrued benefits under current law, whose eligibility varies as described on this table:

	Deceased beneficiary died prior to December 16, 2003		Deceased beneficiary died on or after December 16, 2003
	Claim pending on December 16, 2003	Claim received on or after December 16, 2003	
Does the one-year time limit to file the claim apply?	(1) Yes for accrued benefits	Yes for accrued benefits	Yes for accrued benefits
	(2) No for benefits awarded but unpaid.	In this situation ''accrued benefits'' includes benefits awarded but unpaid.	In this situation ''accrued benefits'' includes benefits awarded but unpaid.
Does the two-year limitation on the benefit-payable period apply?	(1) Yes for accrued benefits	Yes for accrued benefits	No.
	(2) No for benefits awarded but unpaid.	In this situation ''accrued benefits'' includes benefits awarded but unpaid.	This limitation does not apply if a deceased beneficiary died on or after December 16, 2003.

Based on the statutory changes described above, we propose to amend § 3.1000(a) by deleting the comma between the phrases ''to which a payee was entitled at his death under existing ratings or decisions'' and ''or those based on evidence in the file at date of death''. We also propose to delete the phrase ''for a period not to exceed 2 years prior to the last date of entitlement as provided in § 3.500(g).'' We note that 38 CFR 3.500(g) addresses the effective date of a discontinuance or reduction based on the death of the beneficiary. Because § 3.500(g) is only used in § 3.1000 regarding the two year period, which was repealed by section 104(a) of the Act, and is not applicable otherwise to § 3.1000, we propose to delete the reference to § 3.500(g). We also propose to change the outdated phrase ''his death'' in current § 3.1000(a) to ''his or her death''.

Section 104(b) of the Act also amended section 5121 to provide that surviving parents may claim accrued benefits upon the death of a child who had claimed benefits under 38 U.S.C. chapter 18. Under section 104(d) of the Act, this amendment applies when the child dies on or after December 16, 2003. To ensure consistency with the statute, we propose to include this new provision in § 3.1000. We propose to add this provision as a new § 3.1000(a)(4), and redesignate current § 3.1000(a)(4) as (a)(5), because current § 3.1000(a)(4) is a catch-all default provision, and appropriately should be the last provision in paragraph (a).

The Federal Circuit clarified another aspect of benefits under 38 U.S.C. 5121 in *Jones* v. *West*, 136 F.3d 1296, 1299 (Fed. Cir. 1998):

> Reading [38 U.S.C.] 5101 and 5121 together compels the conclusion that, in order for a surviving spouse to be entitled to accrued benefits, the veteran must have had a claim pending at the time of his death for such benefits or else be entitled to them under an existing rating or decision. Section 5101(a) is a clause of general applicability and mandates that a claim must be filed in order for any type of benefit to accrue or be paid.

Therefore, we additionally propose to amend the definition of ''[e]vidence in the file at date of death'' in § 3.1000(d)(4) to ''evidence in VA's possession on or before the date of the beneficiary's death, even if such evidence was not physically located in the VA claims folder on or before the date of death, in support of a claim for VA benefits pending on the date of death.'' We also propose to define ''claim for VA benefits pending on the date of death'' in a new § 3.1000(d)(5) as ''a claim filed with VA that had not been finally adjudicated by VA on or before the date of death.'' This statement means that VA would consider a filed claim to have been pending on the date of death, if it had not been adjudicated, or, if the claim had been adjudicated, the time to appeal had not expired or there was no final decision by the Board of Veterans' Appeals (BVA or Board). We additionally propose to state in new § 3.1000(d)(5) that a claim may include a deceased beneficiary's claim to reopen a finally disallowed claim based upon new and material evidence or a deceased beneficiary's claim of clear and unmistakable error in a prior rating or decision.

We note the definition in new § 3.1000(d)(5) does not preclude a survivor from filing an accrued benefits claim based on a decedent's claim that had been judicially appealed. In that case, the CAVC typically vacates the BVA decision in order to preserve potential accrued benefits claims. For example, the CAVC noted the following in *Sagnella* v. *Principi*, 15 Vet. App. 242, 246 (2001):

> This Court held in *Landicho* [v. *Brown*, 7 Vet. App. 42 (1994),] that the appropriate remedy [when a veteran dies while his or her BVA decision is on appeal] is to vacate the Board decision from which the appeal was taken and to dismiss the appeal. *Landicho*, 7 Vet. App. at 54. This ensures that the Board decision and the underlying VA regional office (RO) decision(s) will have no preclusive effect in the adjudication of any accrued-benefits claims derived from the veteran's entitlements. It also nullifies the previous merits adjudication by the RO because that decision was subsumed in the Board decision.

Finally, section 5121(a) authorizes payment to survivors only of periodic monetary benefits that were ''due and unpaid'' to a deceased beneficiary. Because VA is prohibited by 38 U.S.C. 5304(c) from paying compensation or pension to a veteran for any period in which the veteran received active service pay, no compensation or pension could have been ''due'' to a veteran for any period for which he or she actually received active service pay. Accordingly, for purposes of determining the amount of benefits payable to a survivor under section 5121(a), compensation or pension benefits could not have been ''due and unpaid'' to the veteran for any period for which the veteran received active service pay. *See* VAOPGCPREC 10–2004 (2004). Therefore, we propose to add a new paragraph (i) to § 3.1000 to provide this explanation.

Paperwork Reduction Act

This document contains no provisions constituting a collection of information under the Paperwork Reduction Act of 1995 (44 U.S.C. 3501–3521).

Regulatory Flexibility Act

The Secretary hereby certifies that this proposed rule will not have a significant economic impact on a substantial number of small entities as they are defined in the Regulatory Flexibility Act, 5 U.S.C. 601–612. This proposed rule would not affect any small entities. Therefore, pursuant to 5 U.S.C. 605(b), this proposed rule is exempt from the initial and final regulatory flexibility analysis requirements of sections 603 and 604.

Executive Order 12866

Executive Order 12866 directs agencies to assess all costs and benefits of available regulatory alternatives and, when regulation is necessary, to select regulatory approaches that maximize net benefits (including potential economic, environmental, public health and safety, and other advantages; distributive impacts; and equity). The Order classifies a rule as a significant regulatory action requiring review by the Office of Management and Budget if it meets any one of a number of specified conditions, including: having an annual effect on the economy of $100 million or more, creating a serious inconsistency or interfering with an action of another agency, materially altering the budgetary impact of entitlements or the rights of entitlement recipients, or raising novel legal or policy issues. VA has examined the economic, legal, and policy implications of this proposed rule and has concluded that it is a significant regulatory action because it may raise novel legal and policy issues under Executive Order 12866.

Unfunded Mandates

The Unfunded Mandates Reform Act of 1995 requires, at 2 U.S.C. 1532, that agencies prepare an assessment of anticipated costs and benefits before issuing any rule that may result in the expenditure by State, local, and tribal governments, in the aggregate, or by the private sector, of $100 million or more (adjusted annually for inflation) in any year. This proposed rule would have no such effect on State, local, and tribal governments, or on the private sector.

Catalog of Federal Domestic Assistance Numbers and Titles

The Catalog of Federal Domestic Assistance program numbers and titles for this proposal are 64.102, Compensation for Service-Connected Deaths for Veterans' Dependents, 64.104, Pension for Non-Service-

Connected Disability for Veterans, 64.105, Pension to Veterans Surviving Spouses, and Children, 64.109, Veterans Compensation for Service-Connected Disability, and 64.110, Veterans Dependency and Indemnity Compensation for Service-Connected Death.

List of Subjects in 38 CFR Part 3

Administrative practice and procedure, Claims, Disability benefits, Health care, Pensions, Radioactive materials, Veterans, Vietnam.

Approved: March 17, 2006.

Gordon H. Mansfield,

Deputy Secretary of Veterans Affairs.

For the reasons set out in the preamble, VA proposes to amend 38 CFR part 3 (subpart A) as follows:

PART 3—ADJUDICATION

Subpart A—Pension, Compensation, and Dependency and Indemnity Compensation

1. The authority citation for part 3, subpart A continues to read as follows:

Authority: 38 U.S.C. 501(a), unless otherwise noted.

2. Amend § 3.1000 as follows:

a. In paragraph (a) introductory text, remove ''at his death'' and add, in its place, ''at his or her death''; remove ''decisions, or'' and add, in its place, ''decisions or''; and remove ''for a period not to exceed 2 years prior to the last date of entitlement as provided in § 3.500(g)''.

b. Redesignate paragraph (a)(4) as paragraph (a)(5).

c. Add a new paragraph (a)(4).

d. In paragraph (d)(4), add '', in support of a claim for VA benefits pending on the date of death'' immediately following ''before the date of death''.

e. Add paragraph (d)(5).

f. Add paragraph (i).

The additions read as follows:

§ 3.1000 Entitlement under 38 U.S.C. 5121 to benefits due and unpaid upon death of a beneficiary.

(a) * * *

(4) Upon the death of a child claiming benefits under chapter 18 of this title, to the surviving parents.

* * * * *

(d) * * *

(5) *Claim for VA benefits pending on the date of death* means a claim filed with VA that had not been finally adjudicated by VA on or before the date of death. Such a claim includes a deceased beneficiary's claim to reopen a finally disallowed claim based upon new and material evidence or a deceased beneficiary's claim of clear and unmistakable error in a prior rating or decision. Any new and material evidence must have been in VA's possession on or before the date of the beneficiary's death.

* * * * *

(i) *Active service pay.* Benefits awarded under this section do not include compensation or pension benefits for any period for which the veteran received active service pay.

(Authority: 38 U.S.C. 5304(c))

[FR Doc. E6–10228 Filed 6–28–06; 8:45 am]

BILLING CODE 8320–01–P

Notices

Federal Register
Vol. 71, No. 125
Thursday, June 29, 2006

This section of the FEDERAL REGISTER contains documents other than rules or proposed rules that are applicable to the public. Notices of hearings and investigations, committee meetings, agency decisions and rulings, delegations of authority, filing of petitions and applications and agency statements of organization and functions are examples of documents appearing in this section.

DEPARTMENT OF AGRICULTURE

Submission for OMB Review; Comment Request

June 23, 2006.

The Department of Agriculture has submitted the following information collection requirement(s) to OMB for review and clearance under the Paperwork Reduction Act of 1995, Public Law 104–13. Comments regarding (a) whether the collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility; (b) the accuracy of the agency's estimate of burden including the validity of the methodology and assumptions used; (c) ways to enhance the quality, utility and clarity of the information to be collected; (d) ways to minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology should be addressed to: Desk Officer for Agriculture, Office of Information and Regulatory Affairs, Office of Management and Budget (OMB), *OIRA_Submission@OMB.EOP.GOV* or fax (202) 395–5806 and to Departmental Clearance Office, USDA, OCIO, Mail Stop 7602, Washington, DC 20250–7602. Comments regarding these information collections are best assured of having their full effect if received within 30 days of this notification. Copies of the submission(s) may be obtained by calling (202) 720–8681.

An agency may not conduct or sponsor a collection of information unless the collection of information displays a currently valid OMB control number and the agency informs potential persons who are to respond to the collection of information that such persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

Rural Utilities Service

Title: 7 CFR Part 1744–C, Advance and Disbursement of Funds—Telecommunications.

OMB Control Number: 0572–0023.

Summary of Collection: Section 201 of the Rural Electrification Act (RE Act) of 1936 authorizes the Administrator of the Rural Utilities Service (RUS) to make loans for the purpose of providing telephone service to the widest practicable number of rural subscribers. A borrower requesting loan advances must submit RUS Form 481, ''Financial Requirement Statement''. Along with the Form 481 the borrower must also submit a description of the advances and upon request copies of backup documentation relating to the transactions. The information is used to determine what projects the contracts listed on the Form relate to. Within a reasonable amount of time, funds are advanced to the borrower for the purposes specified in the statement of purposes.

Need and Use of the Information: The Form 481 is used by RUS to record and control transactions in the construction fund. RUS will collect information and verify that the funds advanced are related directly to loan purposes. If the information were not collected, RUS would not have any control over how loan funds are spent or a record of the balance to be advanced.

Description of Respondents: Business or other for-profit.

Number of Respondents: 177.

Frequency of Responses: Reporting: On occasion.

Total Burden Hours: 1,223.

Rural Utilities Service

Title: 7 CFR Part 1703–H, Deferments of RUS Loan Payments for Rural Development Projects.

OMB Control Number: 0572–0097.

Summary of Collection: Subsection (b) of section 12 of the Rural Electrification Act (RE Act) of 1936, as amended (7 U.S.C. 912), a Rural Utilities Service (RUS) electric or telephone borrower may defer the payment of principal and interest on any insured or direct loan made under the RE Act invest the deferred amounts in rural development projects. The Deferment program is used to encourage borrowers to invest in and promote rural development and rural job creation projects that are based on sound economic and financial analyses.

Need and Use of the Information: RUS will collect information to determine eligibility; specific purposes for which the deferment amount will be utilized; the term of the deferment the borrower will receive; the cost of the total project and degree of participation in the financing from other sources; verification that the purposes will not violate limitations established in 7 CFR 1703–H. If the information were not collected, RUS would be unable to determine eligibility for a project.

Description of Respondents: Not-for-profit; Business or other for-profit.

Number of Respondents: 1.

Frequency of Responses: Recordkeeping; Reporting: On occasion.

Total Burden Hours: 35.

Charlene Parker,

Departmental Information Collection Clearance Officer.

[FR Doc. 06–5802 Filed 6–28–06; 8:45 am]

BILLING CODE 3410–15–P

DEPARTMENT OF AGRICULTURE

Animal and Plant Health Inspection Service

[Docket No. APHIS–2006–0090]

Plant Protection and Quarantine Export-Related Services and Procedures

AGENCY: Animal and Plant Health Inspection Service, USDA.

ACTION: Notice.

SUMMARY: The Plant Protection and Quarantine (PPQ) program of the Animal and Plant Health Inspection Service provides, among other things, certain technical services to businesses and individuals to help them successfully export live plants or plant products. This notice provides information concerning trade-related international agreements and organizations and details PPQ's role in facilitating the export of plants and plant products from the United States.

FOR FURTHER INFORMATION CONTACT: Mr. Narcy G. Klag, Deputy Director, Phytosanitary Issues Management, PPQ, APHIS, 4700 River Road Unit 140, Riverdale, MD 20737–1236; (301) 734–8262.

SUPPLEMENTARY INFORMATION: Any business or individual in the United States who wants to export a product to a foreign country may need to meet a number of requirements. These requirements range from practical and commercial (*e.g.*, finding a buyer, arranging financing, shipping, etc.) to legal (*e.g.*, complying with all requirements, whether U.S. or foreign, that may apply to the shipment).

The Plant Protection and Quarantine (PPQ) program of the Animal and Plant Health Inspection Service (APHIS) can provide certain technical services to businesses and individuals to help them successfully export live plants or plant products. No business or individual is required to use our services; U.S. producers do not need to apply to APHIS or obtain permission from APHIS to export any plant or plant product to any foreign country. However, U.S. producers must meet the import requirements of the importing country, and APHIS, when required, certifies that shipments meet the plant quarantine import requirements of the destination country.

International Agreements and Standards

International trade is governed by standards and procedures set by several international organizations. ''International standard'' is defined in 19 U.S.C. 2578b as a standard, guideline, or recommendation:

(A) Regarding food safety, adopted by the Codex Alimentarius Commission, including a standard, guideline, or recommendation regarding decomposition elaborated by the Codex Committee on Fish and Fishery Products, food additives, contaminants, hygienic practice, and methods of analysis and sampling;

(B) Regarding animal health and zoonoses, developed under the auspices of the International Office of Epizootics;

(C) Regarding plant health, developed under the auspices of the Secretariat of the International Plant Protection Convention in cooperation with the North American Plant Protection Organization; or

(D) Established by or developed under any other international organization agreed to by the NAFTA [North American Free Trade Agreement] countries (as defined in section 3301 (4) of this title) or by the WTO [World Trade Organization] members (as defined in section 3501(10) of this title).

Standards and procedures designed to safeguard agricultural resources of member countries have been adopted by the United States and our trading partners as members of these international organizations.

World Trade Organization

Internationally agreed-upon procedures for dealing with trade in general are covered by various World Trade Organization (WTO) agreements. The WTO framework covers matters involving non-tariff barriers, dispute settlement, and other topics. The WTO Agreement on the Application of Sanitary and Phytosanitary Measures [1] (SPS Agreement) governs the use of SPS measures in trade (i.e., plant or animal health regulations and other requirements imposed for the purpose of safeguarding consumer, animal, or plant health or life).

The SPS Agreement applies to all trade in plant and plant-related materials between members, regardless of the quantity, type, or means of transportation, or country of origin or country of destination. The SPS Agreement maintains member countries' right to regulate imports for the purpose of protecting consumer, animal, and plant health, provided such measures are technically justified, not unjustifiably discriminatory, and the least restrictive measure available (i.e., operationally feasible and capable of achieving the importing country's appropriate level of protection). Under the SPS Agreement, all countries are obligated to base their sanitary and phytosanitary measures on international standards where they exist. Also, all countries must decide whether to allow the import of a commodity based on an analysis of the possible pest risk and consideration of possible mitigations.

International Plant Protection Convention

The SPS Agreement recognizes three international standard setting bodies as the official entities for developing health-related standards for global trade. Under the SPS Agreement, members are obligated to recognize these standard-setting organizations. They are:

- Codex Alimentarius, for food safety;
- International Plant Protection Convention (IPPC), for plant health; and
- World Organization for Animal Health (OIE), for animal health.

The IPPC is a multilateral convention adopted in 1952 for the purpose of securing common and effective action to prevent the spread and introduction of pests of plants and plant products and to promote appropriate measures for their control. Under the IPPC, the understanding of plant protection has been and continues to be broad, encompassing the protection of both cultivated and non-cultivated plants from injury by plant pests. Activities addressed by the IPPC include the development and establishment of international plant health standards, the harmonization of phytosanitary activities through emerging standards, the facilitation of the exchange of official and scientific information among countries, and the furnishing of technical assistance to developing countries that are signatories to the IPPC.

The IPPC is administered at the national level by plant quarantine officials whose primary objective is to safeguard plant resources from injurious pests. In the United States, the national plant protection organization (NPPO) is PPQ.

Technical experts from the United States have participated in working groups and as reviewers of all IPPC draft standards. In addition, documents and positions developed by APHIS have been sources of significant input for many of the standards adopted to date. APHIS posts information concerning its IPPC-related activities on the Internet at *http://www.aphis.usda.gov/ppq/pim/standards/*. Interested individuals may review draft IPPC standards and other IPPC documents, which are posted as they become available to member governments, and submit comments via the Web site.

Regional Plant Protection Organizations/North American Plant Protection Organization

Countries, including the United States, also work together under the auspices of the IPPC and their respective regional plant protection organizations (RPPOs) to establish plant health standards.[2] RPPOs coordinate efforts among member countries to protect their plant resources from the entry, establishment, and spread of harmful plant pests, while facilitating intra- and inter-regional trade. Standards adopted by RPPOs may later be proposed, modified, and adopted by the IPPC as global standards.

The United States belongs to the North American Plant Protection Organization (NAPPO). The other NAPPO members include Canada and Mexico. As noted above, PPQ is the United States' NPPO and is delegated the authority to participate in IPPC and NAPPO standard-setting activities.

[1] The full text of the SPS Agreement may be found on the Internet at *http://www.wto.org/english/docs_e/legal_e/legal_e.htm.*

[2] There are several RPPOs, each covering different areas of the world. They are APPC (Far East, Indian subcontinent, Australia and New Zealand), CAN (Andean community), COSAVE (Southern cone of South America), CPPC (Caribbean), IAPSC/CPI (Africa), NAPPO (Canada, Mexico and the United States), OEPP/EPPO (Europe and Mediterranean), OIRSA (Central America), and PPPO (Pacific).

PPQ's Role as NPPO

Generally speaking, specific pest risk mitigation measures for trade in commodities that are identified and evaluated through the pest risk analysis process conducted by the importing country. As the NPPO for the United States, PPQ acts as an intermediary between U.S. exporters and the government of the importing country. In its role as NPPO, PPQ works to ensure that the risk mitigation and import requirements specified by the importing country are appropriate, certifies the commodity is free of pathogens and/or pests of concern to the importing country, and otherwise ensures that trade is conducted consistent with international standards and the importing country's specific phytosanitary import requirements so as to safeguard the importing country's agriculture resources.[3]

To summarize, foreign NPPOs do not work directly with prospective U.S. exporters or State governments; they work instead with PPQ, the NPPO for the United States. PPQ communicates directly with the importing country's NPPO concerning pest risk issues associated with trade in plants and plant products.

APHIS Services and Export Regulations

To successfully export an agricultural product, U.S. producers must meet the import requirements of the importing country. To help producers, PPQ provides various technical services.[4] Our services deal only with plant health (APHIS' Veterinary Services program fulfills a corresponding role with respect to animal health).

Most countries require most imported agricultural commodities to be accompanied by a phytosanitary certificate. In the United States, only Federal phytosanitary certificates (FPCs) are utilized for certifying the phytosanitary health of U.S. exports of plants and plant products. FPCs are official forms that certify that a plant or plant product has been handled, processed, and inspected in the manner required by a foreign government to mitigate the risk associated with certain pests. The FPC may contain information about the source of the commodity, any treatments applied, the pest status of the area where the commodity was produced, and any other information required by the importing country consistent with IPPC norms.

PPQ is responsible, as the NPPO, for issuing FPCs. Inspectors, who may be PPQ employees or State or county officials designated under IPPC and NAPPO standards as Authorized Certification Officials (ACOs), may issue FPCs.[5] [6] Exporters can only obtain the certificate from a designated ACO. FPCs can only be issued for commodities that are eligible under APHIS policy, regardless of the importing country's requirements.

PPQ regulations governing export certification are contained in 7 CFR part 353. These regulations list locations where phytosanitary certification services are offered, what products are covered by the regulations, who may qualify to conduct inspections or draw samples of products for inspection, and detailed information about the various phytosanitary certificates.

Procedures: Initial Contact With APHIS

Prospective exporters who want to export live plants or plant products should first contact their local State agriculture or PPQ office. Exporters should remember that it can be time-consuming to do the work necessary to issue an FPC. Therefore, exporters should contact their local State agriculture or PPQ office as far in advance of the export date as possible. Exporters should contact their local State agriculture or local PPQ office regardless of the type or quantity of plants or plant products to be exported or the method of transportation. Local State agriculture and PPQ offices are listed in telephone directories in the blue government pages. PPQ offices are also listed on our Web site at *http://www.aphis.usda.gov/ppq/pim/exports/es_certification_specialist.html*. Local State agriculture offices are listed on the Internet at *http://www.nationalplantboard.org/member/index.html*.

The issuing office will use EXCERPT, a computerized compilation of the phytosanitary requirements for most countries to which the United States exports agricultural products, to determine if the foreign country allows importation of the commodity from the United States, and if so, will cite the phytosanitary requirements. (For example, the importing country may require a certain type of packaging, require the commodity to be treated, allow imports only during a certain time of year, etc.) We inform the prospective exporter of the country's phytosanitary requirements, including whether the country requires an FPC. We make every effort to keep the information in EXCERPT up to date. However, EXCERPT is only as current as the information provided to us by importing countries.

If a prospective exporter wants to export a commodity that is already allowed (referred to as an enterable commodity) and that requires an FPC, and they are able and willing to comply with the import requirements of the foreign country, they must request the services of an inspector by submitting a written application (PPQ Form 572, Application for Inspection and Certification of Domestic Plant and Plant Products for Export). Phytosanitary certification is based, at a minimum, on a physical inspection of the consignment. Therefore, exporters must apply for an FPC in advance of shipping. The exporter should submit this form to their local State agriculture or PPQ office and that office will issue the FPC. ACOs around the country issue approximately 500,000 FPCs annually. If the importing country requires an import permit, an ACO can give guidance on how to obtain a permit.

Processing FPCs for Enterable Products

If the commodity is enterable and an FPC is required, our local office determines what specific information the country requires on the FPC. Not all countries require an FPC, but their use is growing as global trade increases. Most required information is routine, e.g., shipper's name, name of the commodity (including scientific name), origin of the commodity, quantity, etc. Sometimes the import requirements for a specific commodity require that the commodity be free of a specified pest or disease of particular concern to the

[3] This system works identically for commodities imported into the United States. In that situation, PPQ works with the NPPO of the foreign country, not directly with the foreign producers. After conducting any necessary pest risk analysis and considering possible mitigations, PPQ and the foreign NPPO negotiate the terms of trade in compliance with international standards so as to safeguard the agricultural resources of the United States.

[4] The APHIS, PPQ, Phytosanitary Issues Management Web site contains extensive information of interest to exporters. The following information can be accessed through the Web site: (1) Basic program information; (2) descriptions of certificates and forms (some downloadable); (3) a glossary of definitions and terms; (4) the U.S. Export Standards for Seed Potatoes; (5) a fact sheet about EXCERPT (a database of various countries' import requirements); (6) a list of commodities ineligible for phytosanitary certification or processed product certification; (7) a list of processed products eligible for an export certificates; (8) a discussion of user fees for export certificates; (9) a discussion of export requirements for wood packing material (both export and import); and (10) frequently asked questions. The Web site address is *http://www.aphis.usda.gov/ppq/pim/exports/*.

[5] U.S. sanitary certificates are also issued by APHIS for animal; products. APHIS, Veterinary Services, is responsible for issuing these certificates.

[6] PPQ, and most cooperating States, charge a user fee for each FPC. Current PPQ user fees are listed in 7 CFR 354.4(g).

importing country, and the FPC may be required to include a certification to that effect. Each special certification, known as an additional declaration, must be made on the FPC.

We work with the prospective exporter to meet the importing country's phytosanitary and other technical requirements. We communicate with the exporter as appropriate (letter, fax, e-mail, telephone) to work through this stage. We attempt to provide technical help as practical. However, it is the responsibility of the exporter to comply with import requirements of the country of destination. For example, if the importing country requires a certain type of packaging, the exporter must make arrangements to have their commodity packaged as required. If a country requires that a commodity is free of a certain pest or pathogen, we will conduct the appropriate test or inspection to ensure freedom from the pest, and issue an FPC stating that fact. We may suggest how the exporter can grow, process, or package the commodity so that it is and remains free of the pest or pathogen. However, compliance-actually ensuring that the commodity is free of the regulated pest-is the exporter's responsibility.

The prospective exporter must be prepared to supply the following information to the local State agriculture or PPQ office. This information is necessary to complete PPQ Form 572.

Information about the party submitting the request:

- Name, mailing address, and telephone and fax numbers of exporter.
- Name, mailing address, and telephone and fax numbers of applicant, if different from exporter's.

Information about the commodity proposed to be exported:

- Location of commodity to be exported.
- Description of commodity to be exported. A scientific name may be required to determine phytosanitary requirements. Identity of the particular plant or plant part (e.g., fruit, leaf, root, entire plant, etc.) and any associated plant part proposed to be exported.
- Quantity and weight/volume of each commodity, including total number of packages of each commodity.
- The proposed end use of the exported commodity (e.g., propagation, consumption, milling, decorative, processing, etc.).
- If the commodity is processed, a detailed description of the processing.
- Origin of the commodity (where it was grown).

Shipping information:

- Proposed date of exportation.
- Name and address of consignee in foreign country.
- Distinguishing markings on packaging.
- Type of conveyance (air, rail, truck, vessel).
- Port of export.
- Port of import (must be in the same country as the consignee).

Processing Petitions for Currently Restricted or Prohibited Products

If the commodity is currently restricted or prohibited, or there are requirements the prospective exporter cannot meet or does not believe are fair or reasonable, the exporter should contact the director of PPQ's Phytosanitary Issues Management (PIM) staff directly. We accept ''requests to petition'' U.S. trading partners on behalf of U.S. exporters. We refer to all requests as export petitions.

We prefer petitions to be submitted by mail or private courier, though we accept petitions by fax at 301–734–7639. We do not accept petitions over the telephone or by electronic mail, although we certainly encourage prospective exporters to contact us by phone to discuss their individual situations and obtain advice.

For the most efficient service, written export petitions should be mailed directly to: Director, Phytosanitary Issues Management, APHIS, PPQ, 4700 River Road Unit 140, Riverdale, MD 20737–1236. Petitions transmitted through a third party invariably take longer to reach us. In all cases, processing delays can be avoided by confirming that we have received the petition.

We start processing an export petition as soon as we receive it. No particular format or wording is required. But for the quickest service, some basic information should be included in the petition. This is the same information listed above under the heading ''Processing FPCs for Enterable Products.'' Including as much of this information as possible in the initial requesting letter helps us process the petition efficiently.

When we receive a written petition, one of our trade directors determines whether it is a petition to open a market, expand a market, or retain a market. Petitioners are usually not aware of these categories. However, they are important for PPQ. The type of market access requested dictates how PPQ handles the petition. It also gives us an idea of the services the petitioner may want or need.

Petitions for currently restricted or prohibited commodities are petitions to open a market. If a foreign country does not currently allow import of a specific commodity from the United States, we will work with the petitioner to open that market. In some cases, a market is closed to certain commodities from the United States because:

- The foreign country has never considered whether to allow importation because no one has ever requested it;
- There is a pest risk that cannot be mitigated;
- There is a mitigation, but it is technically or economically not feasible to use; or
- The importing country believes it does not have sufficient information to address its concerns.

The bulk of petitions are petitions to retain or expand a market. If a foreign country allows imports of a commodity from the United States, but imports are restricted, e.g., geographically (only allowed to enter a portion of the country), in time (only allowed to be shipped during certain times of the year), or subject to restrictive phytosanitary measures, or if a country restricts an enterable commodity due to a perceived pest risk, we will work to expand the market.

Unfortunately, there is no global list of possible requirements and restrictions. Requirements and restrictions are particular to what are called ''commodity-country pairs,'' that is, a specific commodity from a country (for example, cherries from the United States) going to a specific country (for example, Spain). Generally, requirements and conditions apply to a specific commodity-country combination. However, in the future we expect to see the development and application of global import standards for specific commodity/pest combinations (e.g., developed by the IPPC and/or individual countries).

If the exporter cannot meet the foreign country's requirements, we will work with the exporter and the foreign country to develop acceptable alternatives. Common situations of this type are where the foreign country requires a commodity to be treated using a chemical that is not approved for application in the United States, or when a requirement is impractical or too expensive for the exporter.

Occasionally foreign countries impose requirements which are contrary to the SPS Agreement. In these situations we work with the foreign country to develop acceptable alternatives or to have the inappropriate requirement eliminated.

Full Market Access Not Allowed—Overly Restrictive Measures

Sometimes the foreign country allows the requested commodity to be imported from the United States, but restricts importation geographically or in time. That is, the commodity is allowed to be exported from the United States only into a portion of the foreign country or only during a certain time of year. In many cases these restrictions are appropriate. In other cases, we may disagree and believe less restrictive requirements would protect the legitimate agricultural interests of the importing country. For example, there may be cases where, since the restrictions were put in place, a systems approach or a new treatment has been developed, or a regulated pest that previously existed in the United States has been eradicated. As with all restrictions, we inform the exporter. The exporter may find the requirements acceptable, or the exporter may decide they want to pursue exportation only if the requirements are less restrictive. In that case, we work with them and the importing country to identify less restrictive, but effective, measures to safeguard the importing country's agricultural health interests. Negotiations are extremely time-consuming and there is no guarantee of success.

The situation is similar if the importing country does not allow importation of the commodity at all from the United States. The country may actually prohibit importation or it may never have considered whether to allow importation. We inform the exporter of the situation. If they still want to pursue their petition, we will work with them and the foreign country to resolve the matter. However, as with expanding market access, the process of obtaining market access is extremely time-consuming and there is no guarantee of success.

When we are working to expand or obtain market access, PPQ may have to supply information to the foreign country so they can conduct a pest risk analysis. With help from the exporter, we provide the foreign country with the information they need.

If a risk analysis is required, the exporter may have to provide extensive information. The types of information required are the same as PPQ requests in order to conduct a pest risk analysis for a foreign commodity that has been proposed for importation into the United States.[7]

The information actually needed depends on the individual petition. The trade director works with the exporter and scientific experts to develop a package of data supporting the export petition. It is very much in the exporter's interest to provide information that is needed, as it facilitates the timely processing of their petition. If APHIS cannot obtain necessary information from the exporter, the foreign country will either seek the information from other sources, causing substantial delay, or may deny or delay consideration of the request. The information needed depends on the type of request. The following list describes types of information that might be requested:

- Contact information;
- Information about the area where the commodity is grown; and
- Shipping methods and volume of exports.

In some cases more extensive information might be required. Other information that might be requested includes, for example, a list of pests associated with the commodity, possible mitigation measures, post-harvest handling, and safeguarding procedures.

Retaining Market Access

PPQ works constantly with current exporters and our trading partners to retain and expand markets, and to encourage countries to adopt the least restrictive measures necessary to effectively safeguard their agricultural resources. This is beneficial to both U.S. exporters and to importing countries. For example, eliminating or reducing the volume of dangerous chemicals to treat plants and plant material is a general benefit.

We also work with current exporters to retain markets that are already open to U.S. exporters. Sometimes a market is open, but import requirements change. This may happen because a regulated pest is detected in an arriving shipment, there is a report of a new pest in the United States, or the United States asks the importing country to reevaluate the pest risk of the commodity and to change its import requirements. If we determine that requirements are overly restrictive, PPQ works with the foreign government and with U.S. exporters to find mutually acceptable alternatives.

Documentation and Communication

For each petition we receive, PPQ maintains a file of written documents relating to the petition. We keep a record of every significant decision with a letter or other physical document. Some export petitions are handled very easily. However, any export petition can result in extensive negotiations between the importing country and PPQ. We utilize all appropriate and effective means to conduct negotiations (meetings, telephone calls, video conferences, letters, etc.). Official correspondence between PPQ and officials of the importing country is an especially important part of the negotiating process, and we maintain a complete file of official correspondence for each export petition. In addition, we endeavor to keep exporters informed at every stage of negotiations, and we request their help and cooperation as needed to help the process move forward. PPQ's staff of trade directors, along with APHIS attachés, communicates routinely with our trading partners both personally, one-on-one, and through informal and formal meetings. Bilateral meetings are formal meetings held with our major trading partners.[8] Bilateral meetings are scheduled as needed, when both countries have issues to discuss. PPQ posts minutes from bilateral meetings on the PPQ Web site.[9] These meetings are attended by technical staff and higher level officials; who attends is determined by the issues to be discussed.

With the cooperation of the exporter, we work with our trading partners to resolve technical market access issues. Risk mitigations may be documented in operational workplans. These documents, signed by the NPPO of each country, detail the operational requirements U.S. commodities must meet to be imported into foreign countries.[10]

Completing Work on an Export Petition

The number, gravity, and intricacy of issues raised by an export petition, and the willingness of the foreign government to negotiate over a particular request, determine how long it takes to complete work on an export petition. We consider work on an export petition completed only if one of two events occurs, i.e., the requested export takes place or the prospective exporter withdraws his/her petition.

[7] On May 30, 2006, APHIS published a final rule in the **Federal Register** (71 FR 30563–30568, Docket No. 02–132–2) that amended our commodity import regulations to require the submission of certain information before we will consider any request to import a new commodity for which a risk analysis is required (see 7 CFR 319.5).

[8] As of 2006, we hold bilateral meetings with Australia, Cnada, China, Japan, Mexico, New Zealand, and Taiwan.

[9] Minutes from bilateral meetings held during calendar year 2005 are posted at *http://www.aphis.usda.gov/ppq/pim/bilateral/index.html*.

[10] PPQ also negotiates and agrees to operational workplans covering foreign plants and plant products to be imported into the United States.

It is important to remember that trade negotiations are often extended. It may be many months or years before work on a petition is completed. The disease or pest situation in either the United States or the foreign country may change, governmental policies or goals in either the United States or the foreign country may change, or research or scientific analysis may be necessary before there can be an agreement.

Occasionally a foreign government refuses to consider accepting a commodity for import. However, this is extremely rare. The more common occurrence is a breakdown in negotiations. If it becomes apparent that PPQ can do nothing more to complete work on a petition, we work with APHIS SPS policy offices and the U.S. Department of Agriculture's (USDA) Foreign Agricultural Service to consider other options, including the possibility of seeking the involvement of the Office of the U.S. Trade Representative in addressing a particular SPS trade impasse. Even then we consider these export petitions ''open'' and we continue to work on them as appropriate.

Barriers to Export

There are barriers to export that APHIS cannot resolve. These include:

- When information necessary to resolve the petition is not available;
- When a regulated pest exists in the United States for which there is no effective risk mitigation; and
- When technical discussions with the foreign country have reached an impasse.

We try to minimize these barriers. APHIS and other agencies within USDA are always looking for new and effective systems approaches and treatments. In partnership with the Department of Homeland Security, we endeavor to prevent pests and pathogens from entering the United States from foreign countries. If we detect a pest or pathogen within the United States, we attempt by all means within our authority to keep that pest or pathogen from spreading, and if possible, to eradicate it. We also try to minimize barriers to exports by maintaining good working relationships with foreign officials, by dealing with foreign goods imported into the United States openly, consistently and fairly, and by negotiating in good faith. However, we have no authority or power to force foreign governments, or exporters, to come to an agreement or even to respond to our overtures.

Done in Washington, DC, this 23rd day of June 2006.

Kevin Shea,

Acting Administrator, Animal and Plant Health Inspection Service.

[FR Doc. 06–5799 Filed 6–28–06; 8:45 am]

BILLING CODE 3410–34–P

DEPARTMENT OF AGRICULTURE

Rural Utilities Service

Highwood Generating Station

AGENCY: Rural Utilities Service, USDA.

ACTION: Notice of Availability of Draft Environmental Impact Statement and Notice of Public Meeting.

SUMMARY: Notice is hereby given that the Rural Utilities Service (RUS) is issuing a Draft Environmental Impact Statement (EIS) for the Highwood Generating Station (HGS). The Draft EIS was prepared pursuant to the National Environmental Policy Act of 1969 (NEPA) (U.S.C. 4231 *et seq.*) in accordance with the Council on Environmental Quality (CEQ) regulations for implementing the procedural provisions of NEPA (40 CFR parts 1500–1508) and RUS regulations (7 CFR part 1794). This document has been prepared jointly with the Montana Department of Environmental Quality (MDEQ), which has its own statutory mandates to analyze potential environmental impacts under the Montana Environmental Policy Act (MEPA) (75–1–101 *et seq.*, MCA and ARM 17.4.601 *et seq.*) and to issue permits under the Montana Clean Air Act, Montana Clean Water Act, and Montana Solid Waste Management Act.

The purpose of the EIS is to evaluate the potential environmental impacts of and alternatives to the Southern Montana Electric Transmission & Generation Cooperative, Inc. (SME) application for a RUS loan guarantee to construct a 250 megawatt (MW) coal-fired power plant near Great Falls, Montana. SME is proposing to use a coal combustion technology known as circulating fluidized bed (CFB), along with other proposed pollution controls collectively known as Best Available Control Technology (BACT). SME also proposes to construct and operate four, 1.5-MW wind turbines to generate supplemental electrical power at the preferred project location eight miles east of Great Falls.

DATES: With this notice, RUS and MDEQ invite any affected Federal, State, and local Agencies and other interested persons to comment on the Draft EIS. Written comments on this Draft EIS will be accepted for 45 days following publication of the Environmental Protection Agency's notice of Availability for this Draft Environmental Impact Statement (DEIS) in the **Federal Register**.

RUS and MDEQ will hold a public meeting on July 27, 2006, at the Great Falls Civic Center (Gibson Room), 2 Park Drive South, Great Falls, MT. The public meeting will begin with an open house at 5 p.m., followed by a public hearing starting at 7 p.m. The hearing will include a presentation summarizing the findings of the DEIS and the opportunity for attendees to submit both oral and written comments. In accordance with 40 CFR 1503.1, Inviting Comments, the purpose of the meeting will be to solicit comments from interested parties on the Draft EIS for the Highwood Generating Station.

A copy of the Draft EIS can be obtained or viewed online at *http://www.usda.gov/rus/water/ees/eis.htm*. The files are in a Portable Document Format (.pdf); in order to review or print the document, users need to obtain a free copy of Acrobat® Reader® (© 2003 Adobe Systems Incorporated). The Acrobat® Reader® can be obtained from *http://www.adobe.com/prodindex/acrobat/readstep.html*.

Copies of the Draft EIS will also be available for public review during normal business hours at the following locations:

Montana State Library System, Attn: Roberta Gebhardt, P.O. Box 201800, Helena, MT 59620–1800. (406) 444–5393.

University of Montana at Missoula, 32 Campus Drive 59801, Mansfield Library, Missoula, MT 59812. (406) 243–6866.

Missoula Public Library, 301 East Main, Missoula, MT 59802–4799. (406) 721–2665. FAX: (406) 728–5900.

Montana State University Libraries, P.O. Box 173320, Bozeman, MT 59717–3320. Phone: (406) 994–3119. Fax: (406) 994–2851.

Great Falls Public Library, 301 2nd Ave., North, Great Falls, MT 59401–2593. (406) 453–0349.

FOR FURTHER INFORMATION CONTACT: To send comments or for more information, contact: Richard Fristik, USDA, Rural Development, Utilities Programs, 1400 Independence Avenue, Mail Stop 1571, Room 2237, Washington, DC 20250–1571, telephone (202) 720–5093, fax (202) 720–0820, or e-mail: *Richard.Fristik@wdc.usda.gov*.

SUPPLEMENTARY INFORMATION: SME is an electric generation and transmission cooperative, a non-profit utility owned

by its members. As such, it provides wholesale electricity and related services to five electric distribution cooperatives and one municipal utility. SME's 58,000-square mile (150,220-square kilometer) service area encompasses 22 counties in two states—Montana and a very small area of Wyoming. Under its charter, SME is required to meet the electric power needs of the cooperative member systems it serves. Presently, SME meets all of its power requirements for its member systems by purchasing power from two Federal power suppliers—the Bonneville Power Administration (BPA) and the Western Area Power Administration. However, its major supplier (BPA) will begin to phase out its sales of power to SME in 2008, and terminate them entirely by 2011. Thus, SME does not have the capacity to meet all of its members' power needs beyond roughly 2010.

After considering various ways to meet those future needs, SME identified the construction of a new coal-fired power plant near Great Falls—the proposed HGS—supplemented with four wind turbines on the same site, as its best course of action to meet its electric energy and related service needs. An Alternative Evaluation Study and the DEIS examined a total of 26 alternative means of responding to the identified purpose and need for the project. These alternatives were evaluated in terms of cost-effectiveness, technical feasibility, and environmental soundness. Twenty-three alternatives were considered but dismissed from more detailed analysis on one or more of these grounds. The three alternatives analyzed fully in the Draft EIS are the No Action Alternative, Proposed Action (HGS at the Salem Site eight miles east of Great Falls), and Alternative Site (building the power plant at a designated industrial park closer to Great Falls).

Under the No Action Alternative, the HGS would not be constructed or operated to meet the projected 250–MW base load needs of SME. There would be no facilities constructed at either the Salem or Industrial Park sites to meet the purpose and need.

Under the Proposed Action, a 250–MW (net) generating station utilizing CFB technology to burn coal—the HGS—would be built and operated approximately eight miles east of Great Falls. In addition, four 1.5–MW wind turbines would be constructed and operated on the same site. Ash from coal combustion would be disposed of using approved means on-site. The Proposed Action would entail potentially significant adverse impacts on cultural and visual resources, because it is located on and adjacent to the Great Falls Portage National Historic Landmark. Other adverse but non-significant impacts of the Proposed Action include those on soils, water, air, biological resources, noise, transportation, farmland and land use, human health and safety, and environmental justice. The Proposed Action would result in moderately beneficial socioeconomic impacts, including increased employment opportunities, total purchases of goods and services, and an increase in the tax base.

Utilizing the alternative Industrial Park Site would result in broadly similar impacts to those of the Proposed Action, but with some important distinctions. No wind turbines are proposed for the Industrial Park site. Due to space limitations at the Industrial Park site, ash from coal combustion would be hauled off-site to a licensed landfill for disposal. Adverse but non-significant impacts of the Alternative Site include those on soils, water, air, biological resources, noise, cultural resources, visual resources, transportation, farmland and land use, human health and safety, and environmental justice. Building and operating the proposed SME power plant at the Alternative Site would produce moderately beneficial socioeconomic impacts, including increased employment opportunities, total purchases of goods and services, and an increase in the tax base.

Dated: June 22, 2006.

James R. Newby,

Assistant Administrator, Electric Program, Rural Development.

[FR Doc. 06–5801 Filed 6–28–06; 8:45 am]

BILLING CODE 3410–15–P

DEPARTMENT OF AGRICULTURE

Rural Utilities Service

East Kentucky Power Cooperative; Notice of Intent To Hold Public Scoping Meetings and Prepare an Environmental Assessment

AGENCY: Rural Utilities Service, USDA.

ACTION: Notice of intent to hold public scoping meetings and prepare an environmental assessment (EA).

SUMMARY: The Rural Utilities Service, an agency which administers the U.S. Department of Agriculture's Rural Development Programs (USDA Rural Development) intends to hold public scoping meetings and prepare an environmental assessment (EA) related to possible financial assistance to East Kentucky Power Cooperative, Inc. (EKPC) of Kentucky for the proposed construction of approximately 35 miles of 345 kilovolt (kV) transmission line in Clark, Madison, and Garrard counties, KY. The proposed 345 kV transmission line project would be constructed within one of several corridors under consideration. The transmission line corridors originate at the J.K. Smith Power Station near the community of Trapp in Clark County, KY and terminate at the proposed location of a new 345 kV switching station. EKPC is requesting USDA Rural Development to provide financial assistance for the proposed project.

DATES: USDA Rural Development will conduct a scoping meeting in an open house format from 3 p.m. until 7 p.m. on Tuesday, July 11, 2006. The purpose of the meeting is to provide information and solicit comments for the preparation of an EA.

ADDRESSES: The public meeting will be held at the Best Western-Holiday Plaza located at 100 Eastern Bypass, Richmond, KY 40475; Phone: 859–623–9220.

A Macro Corridor Study will be available for public review at USDA Rural Development, Utilities Programs, 1400 Independence Avenue, SW., Washington, DC 20250–1571; at the USDA Rural Development's Web site *http://www.usda.gov/rus/water/ees/ea.htm;* at EKPC's headquarters office 4775 Lexington Road, Winchester, Kentucky 40391; and at the following Public Library locations:

Clark County Library, 370 South Burns Avenue, Winchester, KY 40391. (859) 744–5661. Julie Maruskin, Director.

Madison County Public Library, 507 West Main St., Richmond, KY 40475. (859) 623–6704. Sue Hays, Director.

Garrard County Public Library, 101 Lexington St, Lancaster, KY 40444. (859) 792–3424. Joan Tussey.

Written comments should be sent to: Stephanie Strength, Environmental Protection Specialist, USDA, Rural Development, Utilities Programs, Engineering and Environmental Staff, 1400 Independence Avenue, SW., Stop 1571, Washington, DC 20250–1571, or e-mail: *stephanie.strength@wdc.usda.gov.*

FOR FURTHER INFORMATION CONTACT: Stephanie Strength, Environmental Protection Specialist, USDA, Rural Development, Utilities Programs, Engineering and Environmental Staff, Stop 1571, 1400 Independence Avenue, SW., Washington, DC 20250–1571, telephone (202) 720–0468. Mrs. Strength's e-mail address is *stephanie.strength@wdc.usda.gov.*

SUPPLEMENTARY INFORMATION: EKPC proposes to construct a 345 kV transmission line between a source substation at the J.K. Smith Power Station in Clark County and a proposed switching station located near Lancaster, Kentucky. The proposed line would be constructed within one of several corridors under consideration. The proposed corridors are located in Clark, Madison, and Garrard counties. The proposed corridors extend southwesterly from the J.K. Smith Power Station near Trapp, KY. From Trapp, the corridors will extend towards the communities of Union City, Redhouse, and White Hall to the north side of Richmond. From Richmond the corridors head in the southwesterly direction near communities such as Roundhill, Kirksville, Ruthton, Teatersville, Mcreary, Nina, and Three Forks towards the proposed location of a 345kV switching station. The proposed switching station would be located west of the community of Lancaster. The transmission line would require a right-of-way of 150 feet. Depending on which route is chosen the approximate length of the transmission line would be from 35–37 miles. It is anticipated that this transmission line would be in service in late spring to early summer of 2009.

Alternatives considered by USDA Rural Development and EKPC include: (a) No action, (b) alternative transmission improvements, and (c) alternative transmission line corridors.

An Electric Alternative Evaluation and Macro Corridor Study Report, prepared by EKPC will be presented at the public scoping meeting. The Report is available for public review at the addresses provided in this notice.

Government agencies, private organizations, and the public are invited to participate in the planning and analysis of the proposed project. Representatives from USDA Rural Development and EKPC will be available at the scoping meeting to discuss USDA Rural Development's environmental review process, describe the project, the need for the project, the macro corridors under consideration, and discuss the scope of environmental issues to be considered, answer questions, and accept oral and written comments.

Questions and comments should be received by USDA Rural Development in writing by August 10, 2006 to ensure that they are considered in this environmental impact determination.

The comments received will be incorporated into the environmental analysis EKPC will submit to USDA Rural Development for review. USDA Rural Development will use the environmental analysis to determine the significance of the impacts of the project and may adopt it as its environmental assessment of the project. USDA Rural Development's environmental assessment of the project would be available for review and comment for 30 days. Should USDA Rural Development determine, based on the EA of the project, that the project would not have a significant environmental impact, it will prepare a finding of no significant impact. Public notification of a finding of no significant impact would be published in the **Federal Register** and in newspapers with a circulation in the project area. Any final action by USDA Rural Development related to the proposed project will be subject to, and contingent upon, compliance with environmental review requirements as prescribed by the Council on Environmental Quality and USDA Rural Development environmental policies and procedures.

Dated: June 22, 2006.

Mark S. Plank,

Director, Engineering and Environmental Staff, USDA/Rural Development/Utilities Programs.

[FR Doc. 06–5803 Filed 6–28–06; 8:45 am]

BILLING CODE 3410–15–P

COMMISSION ON CIVIL RIGHTS

Agenda and Notice of Public Meeting of the Rhode Island State Advisory Committee

Notice is hereby given, pursuant to the provisions of the rules and regulations of the U.S. Commission on Civil Rights, that a planning meeting of the Rhode Island State Advisory Committee will convene at 12:30 p.m. and adjourn at 3 p.m. on Thursday, July 20, 2006 at the law offices of Tillinghast Licht at 10 Weybosset Street in Providence, Rhode Island. The purpose of the meeting is for the committee to review the transcript and summaries of its May briefing on the disparate treatment of minority youth in the education and justice systems in Rhode Island and to plan future work products and potential briefings.

Persons desiring additional information should contact Barbara de La Viez of the Eastern Regional Office, 202–376–7533 (TTY 202–376–8116). Hearing impaired persons who will attend the meeting and require the services of a sign language interpreter should contact the Eastern Regional Office at least 5 (five) working days before the scheduled date of the planning meeting. It was not possible to publish this notice 15 days in advance of the meeting date because of internal processing delays.

The meeting will be conducted pursuant to the provisions of the rules and regulations of the Commission.

Dated at Washington, DC, June 23, 2006.

Ivy L. Davis,

Acting Chief, Regional Programs Coordination Unit.

[FR Doc. E6–10240 Filed 6–28–06; 8:45 am]

BILLING CODE 6335–01–P

DEPARTMENT OF COMMERCE

Census Bureau

[Docket No. 060606154–6154–01]

Privacy Act of 1974: System of Records

AGENCY: U.S. Census Bureau, Commerce.

ACTION: Notice of New Privacy System of Records: COMMERCE/CENSUS–10, American Community Survey.

SUMMARY: In accordance with the Privacy Act of 1974, as amended, 5 U.S.C. 552a(e)(4) and (11), the Department of Commerce is issuing notice of intent to establish a new system of records under COMMERCE/CENSUS–10, American Community Survey.

DATES: To be considered, written comments must be submitted on or before July 31, 2006. Unless comments are received, the amendments to the system of records will become effective as proposed on the date of publication of a subsequent notice in the **Federal Register**.

ADDRESSES: Written comments may be sent to Gerald W. Gates, Chief Privacy Officer, U.S. Census Bureau, Washington, DC 20233. Comments may be submitted electronically to the following electronic mail address: *Dir.Privacy.Office@Census.Gov.*

FOR FURTHER INFORMATION CONTACT: Gerald W. Gates, Chief Privacy Officer, U.S. Census Bureau, Washington, DC 20233, 301–763–2515.

SUPPLEMENTARY INFORMATION: This notice announces the Department's proposal for a new system of records under the Privacy Act. The system is entitled ''American Community Survey.'' The American Community Survey (ACS) testing (demonstration period) occurred between 1996–2004. During that time period, the survey was conducted under the authority of Title 13, Section 182 (Periodic Censuses and Surveys), and therefore is considered to

be covered under the Privacy Act system of records, CENSUS–3, Individual and Household Statistical Surveys and Special Studies Records. In 2004, the ACS was fully implemented as a Decennial Census production activity and as such, was conducted under the authority of Title 13, Section 141 (Decennial Census Activities). An amendment was issued to include the ACS in the existing Privacy Act system of records, CENSUS–5, Population and Housing Census Records of the 2000 Census. Although the production version is being conducted under Decennial Census authority Title 13, Section 141, the Census Bureau has determined that the ACS should have a separate systems notice, CENSUS–10, American Community Survey. The American Community Survey is an ongoing monthly survey of about 250,000 households and an annual sample of approximately 3 million residential addresses in the 50 states and District of Columbia; and another 36,000 residential addresses in Puerto Rico each year.

COMMERCE/CENSUS–10

SYSTEM NAME:

COMMERCE/CENSUS–10, American Community Survey.

SECURITY CLASSIFICATION:

None.

SYSTEM LOCATION:

U.S. Census Bureau, Federal Building 3, Washington, DC 20233; Bureau of the Census, Bowie Computer Center, 17101 Melford Boulevard, Bowie, Maryland 20715.

CATEGORIES OF INDIVIDUALS COVERED BY THE SYSTEM:

All persons counted during the American Community Survey. Participation in the American Community Survey is mandatory.

CATEGORIES OF RECORDS IN THE SYSTEM:

Name, address, telephone number, age, sex, relationships, race, Hispanic origin, housing tenure, marital status, income and employment (income; labor force status; industry; occupation, and class of worker; work status last year; and veteran status); education (school enrollment and educational attainment); origins and language (including ancestry; place of birth; citizenship, and year entry; and language spoken at home); residence five years ago; disability; grandparents as care-givers; place of work and journey to work. In addition, physical characteristics of housing may include the year built, units in structure, number of rooms, number of bedrooms, kitchen facilities, plumbing facilities, telephone service availability, heating fuel, year moved to unit, and farm residence; and vehicles available. Financial characteristics of housing may include home value, selected monthly owner costs, and rent.

AUTHORITY FOR MAINTENANCE OF THE SYSTEM:

13 U.S.C. 141 and 193.

PURPOSE(S):

The American Community Survey records are maintained to perform methodological evaluations and enhancements for data collection and quality control studies; and to undertake linkages with survey and administrative data for statistical projects as authorized by law and the U.S. Census Bureau.

ROUTINE USES OF RECORDS MAINTAINED IN THE SYSTEM, INCLUDING CATEGORIES OF USERS AND THE PURPOSES OF SUCH USES:

None. These records are maintained and used solely for statistical purposes and are confidential under Title 13 of the U.S.C. Sections 9 and 214. Publications do not contain data that could identify any particular household or individual.

POLICIES AND PRACTICES FOR STORING, RETRIEVING, ACCESSING, RETAINING, AND DISPOSING OF RECORDS IN THE SYSTEM:

STORAGE:

Magnetic tape, on-line disk storage, CD–ROMs/DVD, server, and hard disk.

RETRIEVABILITY:

Information may be retrieved by name and address. Name and address information are maintained separately from corresponding survey data for privacy and confidentiality purposes.

SAFEGUARDS:

The U.S. Census Bureau is committed to respecting respondent privacy and protecting confidentiality. Though the Data Stewardship Program, we have implemented management, operational and technical controls and practices to ensure high-level data protection to respondents of our census and surveys: (1) All U.S. Census Bureau sworn individuals are subject to the restrictions, penalties, and prohibitions of Title 13 of the U.S.C., and all employees are annually certified through training concerning the confidentiality of data; (2) data sets released by the U.S. Census Bureau have been subjected to and have successfully met criteria established by an internal Disclosure Review Board to ensure no personally identifiable data is released; (3) an unauthorized browsing policy protects respondent information from casual or inappropriate use by any person with access to Title 13 protected data; and (4) all computer systems that maintain sensitive information are in compliance with Common Criteria auditing, which monitors all read, write, create, and delete access to restricted data.

RETENTION AND DISPOSAL:

American Community Survey respondent data, including personally identifying data, are captured as images suitable for computer processing. Original data sources are destroyed, according to the disposal procedures for Title 13 (''census confidential'') records, after confirmation of successful data capture and data transmission to U.S. Census Bureau headquarters. Personally identified data are scheduled for permanent retention.

SYSTEM MANAGER(S) AND ADDRESS:

Associate Director for Decennial Census, U.S. Bureau of the Census, Federal Building 3, Washington, DC 20233.

NOTIFICATION PROCEDURE:

None.

RECORDS ACCESS PROCEDURES:

None.

CONTESTING RECORDS PROCEDURES:

None.

RECORDS SOURCE CATEGORIES:

U.S. Census Bureau surveys.

EXEMPTIONS CLAIMED FOR THE SYSTEM:

Pursuant to 5 U.S.C. 552a (k)(4), this system of records is exempted from the notification, access and contest requirements of the agency procedures (under 5 U.S.C. 552a (c)(3), (d), (e)(1), (e)(4)(G), (H) and (I), and (f)). This exemption is applicable as data are maintained by the U.S. Census Bureau solely as statistical records as required under Title 13 U.S.C. and are not used in whole or in part in making any determination about an identifiable individual. This exemption is made in accordance with the Department's rules, which appear in 15 CFR part 4b.

Dated: June 16, 2006.

Brenda Dolan,

Departmental Freedom of Information and Privacy Act Officer.

[FR Doc. 06–5786 Filed 6–28–06; 8:45 am]

BILLING CODE 3510–07–P

DEPARTMENT OF COMMERCE

Foreign–Trade Zones Board

Order No. 1457

Approval of Request for Manufacturing Authority Within Foreign–Trade Zone 50, Ontario, California, (Radio Transceivers)

Pursuant to its authority under the Foreign–Trade Zones Act of June 18, 1934, as amended (19 U.S.C. 81a–81u), the Foreign–Trade Zones Board (the Board) adopts the following Order:

Whereas, Metro International Trade Services LLC operator of FTZ 50 submitted an application to the Board on behalf of the Board of Harbor Commissioners of the City of Long Beach (California), grantee of FTZ 50, for manufacturing authority (radio transceivers) within Site 2 of FTZ 50 for Maney Aircraft, Inc. (FTZ Docket 37–2004; filed 8/19/2004);

Whereas, notice inviting public comment was given in the **Federal Register** (69 FR 52855–52856, 8/30/2004) and the application has been processed pursuant to the FTZ Act and the Board's regulations; and,

Whereas, the Board adopts the findings and recommendations of the examiner's report, and finds that the requirements of the FTZ Act and Board's regulations are satisfied, and that the proposal is in the public interest;

Now, therefore, the Board hereby orders:

Manufacturing authority for radio transceivers within FTZ 50 for Maney Aircraft, Inc., as described in the application and **Federal Register** notice, is approved, subject to the FTZ Act and the Board's regulations, including Section 400.28.

Signed at Washington, DC, this 16th day of June 2006.

David M. Spooner,

Assistant Secretary of Commerce for Import Administration, Alternate Chairman, Foreign–Trade Zones Board.

Attest:

Pierre V. Duy,

Acting Executive Secretary.

[FR Doc. E6–10221 Filed 6–28–06; 8:45 am]

BILLING CODE 3510–DS–S

DEPARTMENT OF COMMERCE

Foreign–Trade Zones Board

Order No. 1458

Grant Of Authority For Subzone Status, Space Systems/Loral, Inc. (Satellites and Satellite Systems), Palo Alto, Menlo Park and Mountain View, California

Pursuant to its authority under the Foreign–Trade Zones Act, of June 18, 1934, as amended (19 U.S.C. 81a–81u), the Foreign–Trade Zones Board (the Board) adopts the following Order:

Whereas, the Foreign–Trade Zones Act provides for ''...the establishment... of foreign–trade zones in ports of entry of the United States, to expedite and encourage foreign commerce, and for other purposes,'' and authorizes the Foreign–Trade Zones Board to grant to qualified corporations the privilege of establishing foreign–trade zones in or adjacent to U.S. Customs and Border Protection ports of entry;

Whereas, the Board's regulations (15 CFR Part 400) provide for the establishment of special–purpose subzones when existing zone facilities cannot serve the specific use involved, and when the activity results in a significant public benefit and is in the public interest;

Whereas, the City of San Jose, California, grantee of Foreign–Trade Zone 18, has made application to the Board for authority to establish a special–purpose subzone at the satellite and satellite systems manufacturing facilities of Space Systems/Loral, Inc., located in Palo Alto, Menlo Park and Mountain View, California (FTZ Docket 25–2005, filed 5/24/05);

Whereas, notice inviting public comment was given in the **Federal Register** (70 FR 31420–31421, 6/1/05); and,

Whereas, the Board adopts the findings and recommendations of the examiner's report, and finds that the requirements of the FTZ Act and the Board's regulations are satisfied and that approval of the application is in the public interest;

Now, therefore, the Board hereby grants authority for subzone status for activity related to satellite and satellite systems manufacturing at the facilities of Space Systems/Loral, Inc., located in Palo Alto, Menlo Park and Mountain View, California (Subzone 18E), as described in the application and **Federal Register** notice, and subject to the FTZ Act and the Board's regulations, including § 400.28. It is noted that the granting of FTZ status does not reflect an intent of the FTZ Board to relieve Space Systems/Loral, Inc. of obligations and responsibilities to comply with the Arms Control Export Act, the International Traffic in Arms Regulations and license requirements and orders, thereunder, including the order requiring the company to comply with the Consent Agreement of January 9, 2002.

Signed at Washington, DC, this 16th day of June 2006.

David M. Spooner,

Assistant Secretary of Commerce for Import Administration, Alternate Chairman, Foreign–Trade Zones Board.

Attest:

Pierre V. Duy,

Acting Executive Secretary.

[FR Doc. E6–10222 Filed 6–28–06; 8:45 am]

BILLING CODE 3510–DS–S

DEPARTMENT OF COMMERCE

Foreign–Trade Zones Board

Order No. 1456

Expansion of Foreign–Trade Zone 68, El Paso, Texas

Pursuant to its authority under the Foreign–Trade Zones Act of June 18, 1934, as amended (19 U.S.C. 81a–81u), the Foreign–Trade Zones Board (the Board) adopts the following Order:

Whereas, the City of El Paso, Texas, grantee of Foreign–Trade Zone 68, submitted an application to the Board for authority to expand FTZ 68–Site 1 to include additional acreage at the El Paso International Airport complex and to remove 35 acres from zone status at Site 2–Ivey Development/AAA Park in El Paso, Texas, within the El Paso Customs port of entry (FTZ Docket 59–2005; filed 11/29/05);

Whereas, notice inviting public comment was given in the **Federal Register** (70 FR 73432, 12/12/05) and the application has been processed pursuant to the FTZ Act and the Board's regulations; and,

Whereas, the Board adopts the findings and recommendations of the examiner's report, and finds that the requirements of the FTZ Act and Board's regulations are satisfied, and that the proposal is in the public interest;

Now, therefore, the Board hereby orders:

The application to expand FTZ 68 is approved, subject to the Act and the Board's regulations, including Section 400.28, and further subject to the Board's standard 2,000–acre activation limit for the overall general–purpose zone project.

Signed at Washington, DC, this 16th day of June 2006.

David M. Spooner,

Assistant Secretary of Commerce for Import Administration, Alternate Chairman, Foreign–Trade Zones Board.

Attest:

Pierre V. Duy,

Acting Executive Secretary.

[FR Doc. E6–10220 Filed 6–28–06; 8:45 am]

BILLING CODE 3510–DS–S

DEPARTMENT OF COMMERCE

[Docket Nos. 04–BIS–25 and 04–BIS–26]

Under Secretary for Industry and Security; In the Matter of: BiB Industrie-Handel Dipl.Ing M. Mangelsen GmbH and Malte Mangelsen Respondents; Decision and Order

On November 17, 2004, the Bureau of Industry and Security (''BIS'') initiated two separate administrative actions against BiB Industrie-Handel Dipl.Ing M. Mangelsen GmbH (''BiB'') and Mr. Malte Mangelsen (''Mangelsen''), in his individual capacity. BIS alleged that BiB and Mangelsen each committed nine violations of the Export Administration Regulations (Regulations) [1], issued under the Export Administration Act of 1979, as amended (50 U.S.C. app. §§ 2401–2420 (2000)) (the Act).[2]

The charges against each Respondent are as follows:

Charge 1 alleges that from September 2001 and continuing through June 2002, BiB and Mangelsen conspired and acted in concert with others to arrange for the export from the United States to Libya of items subject to the Regulations that required U.S. Government authorization in violation of the Regulations. The items were spare parts for hydraulic shears. This was alleged as a violation of § 764.2(d) of the Regulations.

Charge 2 alleges that during the same period, BiB and Mangelsen took actions with intent to evade the Regulations by obtaining the spare parts that are the subject of Charge 1 from a U.S. manufacturer, through co-conspirators in the United States and the United Kingdom, for eventual shipment to Libya without obtaining the required U.S. Government authorization. This activity was alleged as a violation of § 764.2(h) of the Regulations.

Charges 3 and 4 allege that on two separate occasions on September 30, 2002, Mr. Mangelsen, on behalf of BiB, took actions with the intent to evade the Regulations by forwarding to the U.S. manufacturer requests for price and shipping information for spare parts intended for Libya without obtaining the required U.S. Government authorizations. These actions were alleged by BIS as a violation of § 764.2(h) of the Regulations.

Charges 5 and 6 allege that on two occasions, February 14 and 26, 2003, Mangelsen and BiB took actions with the intent to evade the Regulations by using an ''Enquiry'' to solicit pricing and shipping information for spare parts destined for Libya without obtaining the required U.S. Government authorization. In this instance, the parts were for pumping equipment located in a project in Libya. This was alleged as a violation of § 764.2(h) of the Regulations.

Charge 7 alleges that on May 12, 2003, Mangelsen, on behalf of BiB, took actions with intent to evade the Regulations by soliciting a government informant in the United States to contact a U.S. company for pricing and shipping information for spare parts destined for Libya without obtaining the required U.S. Government authorization. The parts involved in this charge were cone crusher and screen plant spare parts. This was a violation of § 764.2(h) of the Regulations.

Charges 8 and 9 allege that on two occasions on June 6, 2003, Mangelsen, on behalf of BiB, took actions with the intent to evade the Regulations by soliciting a government informant to contact U.S. companies for pricing and shipping information for two separate orders for spare parts destined for Iran without obtaining the required U.S. Government authorization. These activities were also alleged as violations of § 764.2(h) of the Regulations.

On July 12, 2005, Mangelsen, on behalf of himself and BiB, filed an answer to BIS's charging letter in which he denied any wrongdoing. On January 9, 2006, the Administrative Law Judge (''ALJ'') issued an Order consolidating the cases against BiB and Mangelsen in the interest of judicial economy. On February 9, 2006, the ALJ issued a Modified Scheduling Order that established a time frame for the submission of evidence and arguments by the parties. Pursuant to the Order, on March 10, 2006, BIS filed a Memorandum and Submission of Evidence to Supplement the Record. On April 11, 2006, Mangelsen, on behalf of himself and BiB, filed an Answer to BIS's March 10, 2006, Memorandum and Submission of Evidence. On April 25, 2006, BIS submitted a Rebuttal Memorandum to Mangelsen's April 11, 2006 Answer.

Thereafter, on May 23, 2006, based on the record before him, the ALJ issued a Recommended Decision and Order in which he found that BiB and Mangelsen each committed seven violations of the Regulations. Specifically, the ALJ found BiB and Mangelsen committed the offenses contained in Charges 1–7. The ALJ, however, found that BIS did not prove by a preponderance of the evidence Charges 8–9. The ALJ recommended each Respondent be assessed a $77,000 civil penalty and denied export privileges for a period of twenty years. In responsive pleadings, BIS did not contest the findings and recommendations made by the ALJ. In a letter dated May 29, 2006, Respondents continued to claim no wrongdoing.

The ALl's Recommended Decision and Order, together with the entire record in this case, has been referred to me for final action under § 766.22 of the Regulations. I find that the record supports the ALl's findings of fact and conclusions of law. BiB and Mangelsen are each liable for violating Charges 1–7. Charges 8 and 9 have not been established by a preponderance of the evidence. I also find that the penalty recommended by the ALJ is appropriate, given the nature of the violations, the lack of mitigating circumstances, and the importance of preventing future unauthorized exports.

I do note, however, several modifications to the ALJ's Recommended Order. First, in footnote 6 of the ALJ's decision, he states that since the charges in this case fall under Section 760 of the Regulations, ''an alternative definition for 'person' found in 15 CFR 760.1(a) will be used when analyzing the individual charges.'' The charges in this case do not fall under Section 760 of the Regulations, which is the ''Restrictive Trade Practices or Boycotts'' chapter of the Regulations. The appropriate definition of the term ''person'' to be used in deciding this

[1] The Regulations are currently codified at 15 CFR Parts 730–774 (2006). The charged violations occurred between 2001 and 2003. The Regulations governing the violations at issue are found in the 2001 through 2003 versions of the Code of Federal Regulations (15 CFR Parts 730–774 (2001–2003)). The 2006 Regulations establish the procedures that apply to this matter.

[2] From August 21, 1994 through November 12, 2000, the Act was in lapse. During that period, the President, through Executive Order 12924, which had been extended by successive Presidential Notices, the last of which was August 3, 2000 (3 CFR, 2000 Comp. 397 (2001)), continued the Regulations in effect under the International Emergency Economic Powers Act (50 U.S.C. 1701–1706 (2000)) (''IEEPA''). On November 13, 2000, the Act was reauthorized and it remained in effect through August 20, 2001. Since August 21, 2001, the Act has been in lapse and the President, through Executive Order 13222 of August 17, 2001 (3 CFR, 2001 Comp. 783 (2002)), which has been extended by successive Presidential Notices, the most recent being that of August 2, 2005 (70 FR 45273 (August 5, 2005)) has continued the Regulations in effect under IEEPA.

case is the one found in § 772.1 of the Regulations (15 CFR 772.1). I also note that on several instances the ALJ cites to 15 CFR 160.1(a) when he discusses the term ''person''. The Code of Federal Regulations does not contain a 15 CFR 160; that section of the CFR is ''Reserved''. I assume these are typographical errors and that the ALJ intended to cite to 15 CFR 760.1(a) to which he referred in footnote 6. For the reasons previously discussed, the correct definition of ''person'' for the purposes of deciding this case is the one contained in 15 CFR 772.1 of the Regulations.

Second, the ALJ inserts knowledge as an element that the BIS needed to prove to support the conspiracy in Charge 1 (*See* ALJ Recommended Order, page 18). Case law has established that knowledge is not necessarily an element in a conspiracy offense. *In U.S.* v. *Feola,* 420 U.S. 671 (1975), the Supreme Court ruled that, if proof of knowledge is not necessary to establish a substantive offense, such knowledge does not have to be proved to establish conspiracy to commit that offense. In this case, the substantive offense would have been the export of hydraulic shears spare parts to Libya without the proper export authorization, a violation of § 764.2(a) of the Regulations. Case law has held that knowledge is not an element of proof necessary to establish a violation of § 674.2(a). *In the Matter of Yu Yi. 03–BIS–11); Iran Air* v. *Kugleman.* 996 F.2d 1253 (D.C. Cir., 1993). Therefore, the ALJ was not correct in his discussion of knowledge as an element of proof in this case.

Neither of the matters discussed above affect the findings and conclusions made by the ALJ in this case. Based on my review of the entire record, I affirm the findings of fact and ultimate conclusions of law in the ALJ's Recommended Decision and Order, consistent with this Decision.

Accordingly, *It is therefore ordered,*

First, that a civil penalty of $77,000 is assessed against each Malte Mangelsen and BiB Industrie-Handel Dipl.Ing M. Mangelsen GmbH which shall be paid to the U.S. Department of Commerce within thirty days from the date of entry of this Order.

Second, pursuant to the Debt Collections Act of 1982, as amended, 31 U.S.C. 3701–20E, the civil penalty owed under this Order accrues interest as provided and if payment is not made by the due date specified, Mr. Mangelsen and BiB will be assessed, in addition to the full amount of the civil penalty and interest, a penalty and administrative charge.

Third, that, for a period of twenty years from the date of entry of this Order, Malte Mangelsen, P.O. Box 10 55 47, Bremen, Germany, 28055, and when acting for or on his behalf, his representatives, agents, assigns, or employees and BiB Industrie-Handel Dipl.Ing M. Mangelsen GmbH, P.O. Box 10 55 47, Bremen, Germany, 28055, and all of its successors and assigns, and, when acting for or on behalf of BiB, its officers, representatives, agents, and employees (hereinafter collectively referred to as ''Denied Persons''), may not, directly or indirectly, participate in any way in any transaction involving any commodity, software or technology (hereinafter collectively referred to as ''item'') exported or to be exported from the United States that is subject to the Regulations, or in any other activity subject to the Regulations, including, but not limited to:

A. Applying for, obtaining, or using any license, License Exception, or export control document;

B. Carrying on negotiations concerning, or ordering, buying, receiving, using, selling, delivering, storing, disposing of, forwarding, transporting, financing, or otherwise servicing in any way, any transaction involving any item exported or to be exported from the United States that is subject to the Regulations, or in any other activity subject to the Regulations; or

C. Benefiting in any way from any transaction involving any item exported or to be exported from the United States that is subject to the Regulations, or in any other activity subject to the Regulations.

Fourth, that no person may, directly or indirectly, do any of the following:

A. Export or reexport to or on behalf of the Denied Persons any item subject to the Regulations;

B. Take any action that facilitates the acquisition or attempted acquisition by the Denied Persons of the ownership, possession, or control of any item subject to the Regulations that has been or will be exported from the United States, including financing or other support activities related to a transaction whereby the Denied Persons acquires or attempts to acquire such ownership, possession or control;

C. Take any action to acquire from or to facilitate the acquisition or attempted acquisition from the Denied Persons of any item subject to the Regulations that has been exported from the United States;

D. Obtain from the Denied Persons in the United States any item subject to the Regulations with knowledge or reason to know that the item will be, or is intended to be, exported from the United States; or

E. Engage in any transaction to service any item subject to the Regulations that has been or will be exported from the United States and that is owned, possessed or controlled by the Denied Persons, or service any item, of whatever origin, that is owned, possessed or controlled by the Denied Person if such service involves the use of any item subject to the Regulations that has been or will be exported from the United States. For purposes of this paragraph, servicing means installation, maintenance, repair, modification or testing.

Fifth, that, after notice and opportunity for comment as provided in Section 766.23 of the Regulations, any person, firm, corporation, or business organization related to the Denied Person by affiliation, ownership, control, or position of responsibility in the conduct of trade or related services may also be made subject to the provisions of this Order.

Sixth, that this Order does not prohibit any export, reexport, or other transaction subject to the Regulations where the only items involved that are subject to the Regulations are the foreign-produced direct product of U.S.-origin technology.

Seventh, that this Order shall be served on the Denied Persons and on BIS, and shall be published in the **Federal Register**. In addition, the ALJ's Recommended Decision and Order, except for the section related to the Recommended Order, shall be published in the **Federal Register.**

This Order, which constitutes the final agency action in this matter, is effective immediately.

Dated: June 23, 2006.

David H. McCormick,

Under Secretary of Commerce for Industry and Security.

Instructions for Payment of Civil Penalty

1. The civil penalty check should be made payable to: U.S. Department of Commerce.

2. The check should be mailed to: U.S. Department of Commerce, Bureau of Industry and Security, Export Enforcement Team, Room H–6883, 14th Street and Constitution Avenue, NW., Washington, DC, Attn: Sharon Gardner.

Recommended Decision and Order

Before: HON. PETER A. FITZPATRICK Administrative Law Judge, United Stated Coast Guard.

Appearances: GREGORY MICHELSEN and MELISSA B. MANNINO.

For the Bureau of Industry and Security.

MALTE MANGELSEN.

For Respondents—Pro se.

II. Summary of Decision

This case involves covert operations occurring in 2001 through 2003 by Respondents BiB Industrie-Handel Dipl.Ing M. Mangelsen GmbH, of Bremen, Germany (''BiB'') and its Managing Director, Mr. Malte Mangelsen of Bremen, Germany (''Mr. Mangelsen''), to unlawfully export spare shear press machine parts to Libya by routing the shipments through Europe in violation of the Export Administration Act of 1979 (''Act'' or ''EAA'') and the Export Administration Regulations (''EAR''). *See* 50 U.S.C. app. §§ 2401–20 (1991), *amended by* Pub. L. 106–508, 114 Stat. 2360 (Supp. 2002) (EAA); 15 CFR Parts 730–74 (1997–1999) (EAR or Regulations). The EAA and its underlying regulations establish a ''system of controlling exports by balancing national security, foreign policy and domestic supply needs with the interest of encouraging export to enhance * * * the economic well being'' of the United States. *See Times Publ'g Co.* v. *United States Dep't of Commerce,* 236 F.3d 1286, 1290 (11th Cir. 2001); *see also* 50 U.S.C.. app. §§ 2401–20.[1]

Here, the Bureau of Industry and Security, United States Department of Commerce (''Bureau'' or ''BIS'') alleges nine violations of the EAR by Respondents and seeks denial of the Respondents' export privileges from the United States for a period of 20 years as well as assessment of $99,000 in civil penalties for each Respondent, Mr. Mangelsen and BiB.

The Bureau has presented substantial, reliable and probative evidence on the record to support the first seven charges. Mr. Mangelsen filed two Answers but did not dispute the contents of the record. Most of the evidence in this record is therefore uncontested. The remaining charges (Charges 8–9), however, are not found proved. There is not a preponderance of the evidence to establish that Respondents took actions with intent to evade the Bureau's Regulations requiring a license to ship to Iran.

Overall, BIS' s request for a Denial Order and assessment of civil penalties is well founded, but the civil penalty amounts have been reduced. Since only seven of the nine violations are proved, a $77,000 civil penalty against each Respondent is deemed appropriate. Additionally, a twenty year Denial Order against each Respondent is ordered.

III. Preliminary Statement

On November 17, 2004, BIS initiated two separate administrative actions against BiB and Mr. Mangelsen, in his individual capacity. The Bureau alleged that BiB and Mangelsen both committed nine violations of the EAR by conspiring to violate the Regulations and taking actions to evade the Regulations.[2]

The charges against each Respondent are as follows:

Charge 1 alleges that from September 2001 and continuing through June 2002, BiB and Mr. Mangelsen conspired and acted in concert with others to violate the Regulations by arranging for the export from the United States to Libya of items subject to the Regulations without the required U.S. Government authorizations.

Charge 2 alleges that during the same period, BiB and Mangelsen took actions with intent to evade the Regulations by obtaining spare parts from U.S. manufacturer through an intermediary in the United Kingdom for eventual shipment to Libya without obtaining the required U.S. Government authorization.

Charges 3 and 4 allege that on two occasions on September 30, 2002, Mr. Mangelsen, on behalf of BiB, took actions with the intent to evade the Regulations by forwarding to the U.S. based supplier requests for price and shipping information for spare parts intended for Libya without obtaining the required U.S. Government authorization.

Charges 5 and 6 allege that on two occasions, on February 13 and 26, 2003, Mangelsen and BiB took actions with the intent to evade the Regulations by using an ''Enquiry'' to solicit pricing and shipping information for spare parts destined for Libya without obtaining the required U.S. Government authorization.

Charge 7 alleges that on May 12, 2003, Mr. Mangelsen, on behalf of BiB, took actions with intent to evade the Regulations by soliciting a government informant in the United States to contact a U.S. company for pricing and shipping information for spare parts destined for Libya without obtaining the required U.S. Government authorization.

Charges 8 and 9 allege that on two occasions on June 6, 2003, Mr. Mangelsen, on behalf of BiB, took actions with the intent to evade the Regulations by soliciting a government informant to contact U.S. companies for pricing and shipping information on two separate orders for spare parts destined for Iran without obtaining the required U.S. Government authorization.[3]

On July 12, 2005, Mr. Mangelsen, on behalf of himself and BiB, filed an Answer to the Bureau's charging letter denying liability for the above referenced violations. His primary defense is based on lack of the Bureau's jurisdiction and lack of applicability of the Regulations.

On August 5, 2005, the Coast Guard Chief Administrative Law Judge assigned the undersigned to preside over this matter and ordered that if ''BIS does not demand a hearing and/or Respondent does not demonstrate good cause for failing to request a hearing, this matter shall be adjudicated under 15 CFR 766.15 and proceed without a hearing.'' BIS did not request a hearing and Respondents has not shown good cause for failing to request a hearing.

Subsequently, on January 9, 2006, an Order Granting Consolidation and Scheduling Order was issued consolidating the cases involving Mangelsen and BiB. Thereafter, on February 9, 2006, the undersigned issued an Order Modifying Scheduling Order ordering the parties to submit such ''affidavits, declarations, depositions, admissions, answers to interrogatories, or stipulations to supplement the present record.'' The February 9, 2006 Order further placed the parties on notice that the case would

[1] The EAA and all regulations under it expired on August 20, 2001. *See* 50 U.S.C. app. 2419. Three days before its expiration, the President declared that the lapse of the EAA constitutes a national emergency. *See* Exec. Order. No. 13222. Exercising authority under the International Emergency Economic Powers Act (''IEEPA''), 50 U.S.C. 1701–1706 (2002), the President maintained the effectiveness of the EAA and its underlying regulations throughout the expiration period by issuing Exec. Order. No. 13222 on August 17, 2001. *Id.* The effectiveness of the export control laws and regulations were further extended by Notices issued by the President in 2002, 2003, 2004, and 2005. *See* 67 FR 53721 (Aug. 14, 2002). *See also* 68 FR 47833 (Aug. 7, 2003); 69 FR 48763 (Aug. 6, 2004); 70 FR 45273 (Aug. 2, 2005). Courts have held that the continuation of the operation and effectiveness of the EAA and its regulations through the issuance of Executive Orders by the President constitutes a valid exercise of authority. *See Wisconsin Project on Nuclear Arms Control* v. *United States Dep't of Commerce*, 317 F.3d 275, 278–79 (D.C. Cir. 2003); Times Publ'g Co. 236 F.3d at 1290 (2001).

[2] The Regulations are currently codified in the Code of Federal Regulations at 15 CFR Parts 730–774 (2005). The charged violations occurred from 2001 to 2003. The Regulations governing the violations at issue are found in the 2001 to 2003 versions of the Code of Federal Regulations (15 CFR Parts 730–774 (2001–2003)). The 2005 Regulations establish the procedures that apply to this matter.

[3] The charge sheet headings for Charges 8 and 9 reference Libya whereas the allegations contained therein and in the Agency's Memorandum reference Iran.

proceed without a hearing and that ''proceeding without a hearing does not relieve the parties from the necessity of proving the facts and supporting their charges or defenses.''

On March 10, 2006, the Bureau filed a Memorandum and Submission of Evidence to Supplement the Record moving for the undersigned to recommend to the Under Secretary of Commerce for Industry and Security (''Under Secretary'')[4] that the export privileges of BiB and Mr. Mangelsen be denied for twenty (20) years and that BiB and Mangelsen each be ordered to pay a $99,000 civil penalty to the Department of Commerce.

On April 11, 2006, Mr. Mangelsen, on behalf of himself and BiB, filed an Answer to the Bureau's March 10, 2006 Memorandum and Submission of Evidence to Supplement the Record. With respect to all charges, Mangelsen asserted the overall defense of lack of jurisdiction and applicability stating that ''BiB * * * as a German Company has not violated the U.S. Laws.'' With respect to Charge 1, Mangelsen contended that because all parties involved ''knew, to which destination these parts should be delivered, there was of course no Conspiracy involved.'' With respect to Charges 2–7, Mangelsen contended that the U.S. company ''knew that this machine was located in Libya'' and that it should have informed him that it ''can't make the quote and that this Enquiry would have been closed,'' but instead that the U.S. company ''quoted knowing that they violated U.S. export regulations.'' Mangelsen further contended that the ''suggestion of Mr. Flanders was a trap to lock Mr. Mangelsen to prison for judging him guilty and issuing a penalty.''

Mr. Mangelsen did not respond to Charges 8–9 in his August 11, 2006 Answer. He did, however, indicate in his July 12, 2005 Answer to the initial Bureau complaint that ''BiB definitely never ever has supplied anything to the Iran.'' Mangelsen requested that ''no further actions be taken against [Mangelsen or] BiB.''

On April 25, 2006, the Bureau filed a Rebuttal Memorandum to Mangelsen's April 11, 2006 Answer. The Rebuttal Memorandum incorporates the same facts as the initial Complaint and adds a Rebuttal to Mangelsen's defense of entrapment. BIS argues that Mr. Mangelsen waived his right to this defense and, in the alternative, Mangelsen was predisposed to commit the prohibited conduct and therefore is barred from using the defense of entrapment.

[4] Pursuant to Section 13(c)(1) of the Act and Section 766.17(b) (2) of the Regulations, in export control enforcement cases, the ALJ issues a recommended decision and order which is reviewed by the Under Secretary, who issues the final decision for the agency.

IV. Recommended Findings of Fact

These Findings of Fact are based on the documentary evidence, such as affidavits, declarations, depositions, admissions, Answers to interrogatories, or stipulations to supplement the present record, and the entire record. The facts of this case are as follows:

1. Mr. Malte Mangelsen is a German Citizen and the managing director of BiB. (Exhibit 9 at 1; Mangelsen Answer of 4/11/2006 at 4).

2. BiB, a German company, is in the business of exporting and reexporting spare machine parts for a shear press. (Mangelsen Answer of 4/11/2006 at 4).

3. In January 1986, in response to Libya's repeated use and support of terrorism against the United States, other countries, and innocent persons, the U.S. initiated economic sanctions against Libya through the Libyan Sanctions Regulations (31 CFR 550) and the Export Administration Regulations (15 CFR 730). *See* 69 FR 23626–01 (Apr. 29, 2004).

4. On April 23, 2004, in response to Libya's continued effort to completely dismantle its weapons of mass destruction and missile programs, and adhere to its renunciation of terrorism, the President of the United States announced the termination of the application of the Iran and Libya Sanctions Act with respect to Libya. *Id.*

5. During the time period in question, it was a violation of the Regulations to export or reexport items subject to the EAR and the Libyan Transactions Regulations to Libya without a license from the Office of Foreign Assets Control of the U.S. Department of the Treasury (''OFAC''). *See* 15 CFR 746.4(b)(1) (2003).

6. During the time period in question, it was a violation of the Regulations to export items subject to both the Iranian Transactions Regulations and the EAR to Iran without a license from OFAC. *See* 15 CFR 746.7(a) (2003).

7. On September 21, 2001, Mr. Malte Mangelsen, on behalf of BiB, contacted Pacific Press & Shear Co. (''Pacific Press'') to obtain a price quotation for spare machine parts for hydraulic shears, using BiB's Reference Number 213b102. (Exhibit 6). Mr. Mangelsen made the request ''CNF Bremen,'' meaning that the price quote would include Pacific Press's cost for ''cargo and freight'' to the destination port of Bremen, Germany. (Exhibit 6; Exhibit 10).

8. Pacific Press is a United States based company located in Mt. Carmel, Illinois. (Exhibit 6; Exhibit 13).

9. On September 24, 2001, Mr. Mangelsen, on behalf of BiB, submitted a revised request for a price quotation under Reference Number 213b102. The revised request was ''CNF Bremen.'' (Exhibit 7).

10. Prior to January 8, 2002, PacificPress quoted Mr. Mangelsen and BiB a price regarding Reference Number 213b102. (Mangelsen Answer of 4/11/2006 at 1).

11. On or about January 8, 2002, BiB caused a wire transfer payment of approximately $7,751 to be made to Pacific Press's bank account as payment for the spare parts. (Exhibit 8).

12. Despite the shipping term ''CNF Bremen,'' Mr. Mangelsen admitted throughout the case that Bremen was not the ultimate destination but that the spare parts in question were ultimately destined for Libya. (Exhibit 9 at 1; Exhibit 10 at 2–6; Mangelsen Answer of 2/16/2004 at 1).

13. On February 8, 2002, a BIS Special Agent, posing as a representative of Pacific Press using the name David Flanders (''Flanders''), contacted Mr. Mangelsen via telephone regarding a shipment order Pacific Press was to execute for BiB. Flanders recorded the conversation and the details are as follows. (Exhibit 10).

a. Mr. Mangelsen acknowledged that Libya was the intended destination for the shipment.

b. Flanders advised Mangelsen that it would be a crime to export the parts to Libya without an appropriate export license, even if they were shipped initially from the United States to Germany.

c. Mangelsen asked if Flanders could resolve the problem.

d. Flanders suggested that, under the veil of secrecy, Mr. Mangelsen find a company ''stateside'' so Pacific Press could make a domestic sale and the stateside company could subsequently ''do whatever they want with it.''

e. Mr. Mangelsen agreed to find a company and have that company contact Pacific Press. Mangelsen asked whether this would alleviate the problem and Flanders indicated there would be no problem.

f. Flanders reiterated that it would be illegal for Flanders to ship the items to Germany with the knowledge that they were destined for Libya.

14. On February 14, 2002, Mr. Mangelsen, on behalf of BiB, e-mailed Pacific Press advising that the stateside point of contact for domestic delivery of the parts would be Mr. John Clements

of Minequip Corporation (''Minequip''). (Exhibit 11).

15. Minequip is located in Miami, Florida. (Exhibit 16).

16. On February 25, 2002, Flanders called Mr. Clements to discuss a transaction whereby Pacific Press would sell the spare parts to Minequip domestically. Flanders advised that it would be illegal for Mr. Clements to subsequently ship to Great Britain without a U.S. license and with the knowledge that the parts were destined for Libya; Mr. Clements acknowledged this information. (Exhibit 12 at 3).

17. Subsequently, on April 22, 2002, Mr. Clements called Pacific Press and stated that he was willing to be the exporter for BIB's order, Reference Number 213b102. (Exhibit 14). On April 23, 2002, Pacific Press notified Mr. Mangelsen of the same via e-mail. (Exhibit 14). On April 26, 2002, Mangelsen responded to Pacific Press via e-mail and agreed that Mr. Clements would act as his domestic agent in obtaining the items destined for Libya. (*Id.;* Exhibit 9).

18. On April 29, 2002, Pacific Press shipped the parts to Mr. Clements on behalf of BiB. (Exhibit 16).

19. Based on the facts of the case, a Federal Grand Jury in the Southern District of Illinois indicted Mr. Mangelsen and four others for conspiracy to violate the IEEPA. (Exhibit 1 at 1).

20. The four others indicted for conspiracy to violate the IEEPA are as follows:

a. Mr. Clements and Minequip: Mr. Clements is the president of Minequip, which is the domestic company BiB used as a middleman between Pacific Press,[5] located in the U.S., and the company located in Europe that would ultimately ship to Libya. (Exhibit 1 at 1).

b. Mr. Jeffrey Woodbridge (''Mr. Woodbridge'') and Sigma Enterprises Limited (''Sigma''): Mr. Woodbridge is the general manager of Sigma, a company located in Europe which BiB used to ultimately ship to Libya after the receiving parts from the middleman in the U.S. (Exhibit 1 at 1).

21. On April 28, 2003, Mr. Clements pled guilty to conspiracy to violate the IEEPA and was sentenced to two years probation and was assessed a $1,000 fine. (Exhibit 2 at 1, 2, 4).

22. On April 28, 2003, Minequip pled guilty to conspiracy to violate the IEEPA and was sentenced to one year probation and was assessed a $4,000 fine. (Exhibit 3 at 1, 2, 4).

23. On November 13, 2002, Mr. Woodbridge pled guilty to conspiracy to violate the IEEPA and was sentenced to three years probation and was assessed a $7,000 fine. (Exhibit 4 at 1,2,4).

24. On January 17, 2003, Sigma pled guilty to conspiracy to violate the IEEPA and was assessed to a $20,000 fine. (Exhibit 5 at 2).

25. On May 16, 2002, the Department of Treasury issued to the United States Customs Services an of OFAC license authorizing the surreptitious export of the spare parts purchased by BiB in furtherance of the law enforcement investigation. (Exhibit 15).

26. On May 22, 2002, Mr. Clements shipped the spare parts to Mr. Woodbridge of Sigma in the United Kingdom on BiB's behalf. Mr. Mangelsen repeatedly admitted that that their ultimate destination was Libya. (Exhibit 9 at 1; Exhibit 16).

27. Prior to December 16, 2004, Mr. Mangelsen received the parts from Mr. Woodbridge, and subsequently sold and shipped the spare parts to Libya. (Exhibit 9 at 1).

28. On two occasions on September 30, 2002, Mr. Mangelsen forwarded to Pacific Press requests for price and shipping information for spare parts intended for Libya with no intention of obtaining the required U.S. Government authorization. (Exhibit 10 at 2; Exhibit 18).

29. In an October 1, 2002 e-mail, Mr. Mangelsen told ''Flanders,'' the BIS Agent purportedly acting as a representative of Pacific Press, that the parts were destined for the same machines as under the previous order and that he would inform Pacific Press of the identity of the person Pacific Press could sell to domestically who would act as the U.S. exporter. (Exhibit 19). Mr. Mangelsen admitted that the machines under the previous order are located in Libya. (Exhibit.9 at 1).

30. On February 13, 2003, Mangelsen, on behalf of BiB, requested that Mr. Clements provide pricing and shipping information for spare parts ''CNF Bremen.'' (Exhibit 20). The BiB reference number was 016b302. (Exhibit 20).

31. On February 26, 2003, Mr. Mangelsen requested a another price quotation from Mr. Clements for parts for Goulds Pump 3171S Series under BiB reference number 077b2051 to be shipped ''CNF Bremen.'' (Exhibit 21).

32. On March 11, 2003, Mr. Clements placed a recorded telephone call to Mangelsen as part of an ongoing Bureau investigation. In that conversation, Mangelsen acknowledged that the items referenced in BiB order numbers 016b302 and 077b2051 were ultimately destined for Libya. Mr. Mangelsen further detailed how the items would be shipped through Germany and subsequently transshipped to Libya. (Exhibit 22 at 2–4).

33. On May 12, 2003, Mangelsen, on behalf of BiB, requested Clements to contact another U.S. company (Kolberg-Pioneer Inc. & PDQ). Mr. Mangelsen had previously been unsuccessful in retaining that company as a supplier because it ''assumed the destination'' was Libya and refused to supply the parts directly to Mangelsen and BiB. Mangelsen's request was for Mr. Clements to obtain a quote for pricing and shipping information for Cone Crusher and Screen Plant Spare Parts. (Exhibit 25; Exhibit 26).

34. Consistent with the previous course of dealings detailed above, the purpose of Mr. Mangelsen's request was for Clements to obtain a quote, purchase the items domestically from the U.S. company, and then export the items to BiB or its designee, who would eventually ship to Libya. (Exhibit 25; Exhibit 26).

35. On June 6, 2003, Mr. Mangelsen, on behalf of BiB, asked Clements to contact another U.S. company for pricing and shipping information on two separate orders for spare parts ''without informing them about the destination.'' (Exhibit 27; Exhibit 28). Mr. Mangelsen made these requests in an Enquiry under the headings ''Re: TI Kixon and Other Parts for Iran'' and ''Re: Foxboro Parts for Iran.'' (Exhibit 27; Exhibit 28). V.

V. Discussion

A. Application of the Export Administration Act and Regulations to Respondents

As a preliminary matter, Mr. Mangelsen contended on behalf of himself and BiB that the Bureau lacks jurisdiction over the relevant transactions. He asserted that because he is from Germany and BiB is a German company, U.S. export laws do not apply. This argument is rejected.

The authority delegated by Congress to the President of the United States under the EAA is extensive. The EAA gives the President authority to regulate or prohibit the export of goods, technology, and information ''to the extent necessary to further the foreign policy of the United States or fulfill its international obligation.'' *See* 50 U.S.C. app. § 2405(a)(1).

1. BIS Authority Over These Items

The instant case involves spare machine parts supplied by Pacific Press of Mt. Carmel, Illinois for shipment abroad to Libya. (Exhibit 10). Based on the above referenced authority, the

[5] Pacific Press was not indicted in the conspiracy.

Regulations specify that ''all U.S. origin items wherever located'' are subject to the EAR and are therefore ''items * * * over which BIS exercises regulatory jurisdiction under the EAR.'' 15 CFR 734.3(a)(1)–(a)(2). The Regulations further specify that ''item'' simply means ''commodities, software, and technology.'' 15 CFR 772.1. Replacement parts for a hydraulic shear press are commodities, and since their supplier was located in Illinois, they were of U.S. origin. They are therefore subject to the EAR, giving BIS regulatory authority.

2. BIS Authority Over Mr. Mangelsen and BiB

At the time in question, the EAR affirmatively stated that ''[y]ou will need a license from BIS to reexport all items subject to the EAR * * * to Libya.'' 15 CFR 746.4 (2003). While there are several narrow and not pertinent exceptions to this license requirement, there are no exceptions to this requirement in the EAR for locality or nationality of the person or company responsible for the reexport. *See* 15 CFR 746.4(2)(i)–(ii). On the contrary, the term ''you'' means ''any * * * natural person, including a citizen of the United States or any foreign country [or] any firm.'' 15 CFR 772.1.

The OFAC's Iran Transactions Regulations similarly prohibited the reexportation of any goods, technology or services from the United States to Iran without express authorization from OPAC and or BIS. *See* 31 CFR 560.204–560. This prohibition includes the exportation of any goods ''to any person in a third country undertaken with knowledge or reason to know that such goods * * * are intended specifically for supply, transshipment, or reexportation, directly or indirectly, to Iran or the Government ofIran.'' *See* 31 CFR 560.204(a).

Section 746.7 of the EAR incorporates the OFAC's Iran Transactions Regulations by reference. It provides that ''[n]o person may export or reexport items subject to both the EAR and OFAC's Iranian Transactions Regulations without prior OFAC authorization.'' 15 CFR 746.7. As with the Regulations regarding Libya, there are no exceptions to this requirement in the EAR for locality or nationality of the person or company responsible for the reexport. Instead, the term ''person'' means a ''natural person, including a citizen or national of the United States or of any foreign country [or] any firm.'' 15 CFR 772.1.[6]

From the plain language of the export laws and Regulations, it is clear that the EAA and EAR were intended to apply extraterritorially, regardless of a person's or company's nationality or locality, so long as items subject to the EAR are involved. *In the Matter of Mahdi,* 68 FR 57,406–02 (Oct. 3, 2003). Thus, it is immaterial that Mr. Mangelsen is German or that BiB is located in Germany and is a German company. To hold otherwise would contravene existing law and regulations, and would completely undermine the effectiveness of the EAA and the EAR.

B. Violations of the Export Administration Act and Regulations

The Agency has the burden of proving the allegations in the Charging Letter by reliable, probative, and substantial evidence. *See* 5 U.S.C. 556(d). The Supreme Court has held that 5 U.S.C. 556(d) adopts the traditional ''preponderance of the evidence'' standard of proof. *Dir., Office of Workers' Comp. Programs* v. *Greenwich Collieries*, 512 U.S. 267, 290 (1994) (the preponderance of the evidence, not the clear-and-convincing standard, applies in adjudications under the APA) (citing *Steadman* v. *S.E.C.*, 450 U.S. 91 (1981)). To prevail under this standard, BIS must establish that it is more likely than not that the Respondents committed the violations alleged in the Charging Letter. *See Herman & Maclean* v. *Huddleston*, 459 U.S. 375, 390 (1983). In other words, the Agency must demonstrate ''that the existence of a fact is more probable than its nonexistence.'' *Concrete Pipe & Products* v. *Construction Laborers Pension Trust*, 508 U.S. 602, 622 (1993). To satisfy the burden of proof, BIS may rely on direct and/or circumstantial evidence. *See generally Monsanto Co.* v. *Spray-Rite Serv. Corp.*, 465 U.S. 752, 764–765 (1984).

The Bureau has separately charged that both Mr. Mangelsen, in his individual capacity, and BiB based on the actions ofMr. Mangelsen, as its managing director, violated Sections 764.2(d) and 764.2(h) of the EAR. The separate cases against Mr. Mangelsen and against BiB have been consolidated into a single case, but the Bureau nevertheless seeks sanction against Mangelsen and BiB separately.

The Regulations are clear that ''no person'' may conspire to violate or act to evade the Regulations. *See* 15 CFR 767.2(d)–(h). A ''person'' is ''any individual, or any association or organization, public or private, which is organized, permanently established, resident, or registered to do business, in the United States or any foreign country.'' 15 CFR 160.1(a). Despite the fact that he is German, Mr. Mangelsen is therefore a correct party to this action and separately responsible for his own actions and conduct whether or not he is acting on BiB's behalf.

Furthermore, ''any firm'' or ''organization'' is a ''person'' under the EAR, and it is well settled that a company can be held liable for the actions of its officers and employees committed within the scope of employment and in furtherance of the employer's business. 15 CFR § 772.1; *see also* 15 CFR 160.1(a); *see, e.g., United States* v. *Bi-Co Pavers. Inc.*, 741 F.2d 730, 737 (5th Cir. 1984); *United States* v. *Sherpix*, 512 F.2d 1361, 1367 n. 7 (D.C. Cir. 1975). BiB is in the international exporting and reexporting business. (Exhibit 2). Mr. Mangelsen's arrangement for the reexportation of spare machine parts falls squarely within the scope of his employment as managing director and was clearly done in the furtherance of BiB's business. Because the doctrine of respondeat superior is applicable in export cases, BiB is also a correct party and is separately responsible for Mr. Mangelsen's actions.

1. Conspiracy To Export Spare Parts to Libya Without the Required U.S. Government Authorization

Mr. Mangelsen and the company Respondent, BiB, have been charged under EAR § 764.2(d) with conspiracy to violate the EAR. The charge alleges that Mangelsen and BiB conspired to export spare parts to Libya without the required government authorization in violation of § 746.4 (2003) of the EAR. The undersigned finds the charge proved by a preponderance of the evidence against both Mangelsen and BiB.

The Regulations provide: ''No person may conspire or act in concert with one or more persons in any manner or for any purpose to bring about or to do any act that constitutes a violation of the EAA, the EAR, or any other order, license or authorization issued thereunder.'' 15 CFR 764.2(d). Conspiracy is an inchoate offense that can be committed regardless of whether the object of the venture is achieved. *See United States* v. *Plummer*, 221 F.3d 1298, 1306 (11th Cir. 2000). *See also*

[6] This definition does riot apply to part 760 of the EAR (Restrictive Trade Practices or Boycotts). 15 CFR 772.1. Since the actual charged offenses fall in part 760 of the EAR, an alternative definition for ''person'' found in 15 CFR 760.1(a) will be used when analyzing the individual charges. The differences between the definition of ''person'' found in Section 760.1 and that which is found in Section 772.1 is irrelevant for the purposes of this proceeding.

Iannelli v. *United States*, 420 U.S. 770, 777 (1975). Thus, to succeed under § 764.2(d), the Agency must merely establish that: (1) Two or more persons formed an agreement to violate the EAA or EAR; (2) the Respondent knowingly participated in the conspiracy; and (3) an overt act was committed in furtherance of a common scheme. *See generally* 50 U.S.C. app. 2410(a).

a. *Agreement to Violate the EAA or EAR.* On September 21, 2001 and on September 24, 2001, Mr. Mangelsen, on behalf of BiB, contacted Pacific Press to obtain a price quotation for spare machine parts for hydraulic shears, using BiB's Reference Number 213b102. (Exhibit 6; Exhibit 7).

On February 8, 2002, a Bureau Special Agent, posing as a representative of Pacific Press and using the name David Flanders (''Flanders''), contacted Mr. Mangelsen via telephone regarding the above referenced shipment order and recorded the conversation. During the conversation, Mr. Mangelsen acknowledged that Libya, not Germany, was the intended final destination for the shipment. (Exhibit 10). Flanders advised Mr. Mangelsen that it would be a crime to export the parts to Libya without an appropriate export license, even if they were shipped initially from the United States to Germany. Mr. Mangelsen asked if Flanders could resolve the problem. (Exhibit 10). Flanders suggested that, under the veil of secrecy, Mr. Mangelsen find a company ''stateside'' so Pacific Press could make a domestic sale and the stateside company could subsequently ''do whatever they want with it.'' (Exhibit 10).

Mr. Mangelsen agreed to find such a company and have that company contact Pacific Press. (Exhibit 10). Mr. Mangelsen asked whether this would alleviate the problem and Flanders affirmed, but Flanders reiterated that it would be illegal for him to ship the items with the knowledge that they were destined for Libya. (Exhibit 10).

In the face of this information, on February 14, 2002, Mr. Mangelsen, on behalf of BiB, e-mailed Pacific Press advising that the stateside point of contact for domestic delivery of the parts would be Mr. John Clements of Minequip, a Miami company. (Exhibit 11; Exhibit 16). On February 25, 2002, Flanders called Mr. Clements to discuss a transaction whereby Pacific Press would ship the spare parts to Minequip domestically. (Exhibit 12). Flanders advised that it would be illegal for Mr. Clements to subsequently ship to Europe without a license and with the knowledge that the parts were destined for Libya; Mr. Clements acknowledged this information. (Exhibit 12).

Based on the conversation between Flanders and Mr. Clements, it is clear that Mr. Mangelsen and Clements previously formed an agreement whereby Clements would receive the parts from Pacific Press and would export those parts to Mr. Mangelsen in Germany, who would reexport them to Libya without obtaining a license. The agreement between Mr. Mangelsen and Mr. Clements clearly qualifies as an agreement between two or more persons to create conspiracy liability under the EAR.

The agreement discussed above between Mr. Mangelsen and Mr. Clements would, if carried out, violate both the EAA and EAR. At the time in question, the EAR affirmatively stated that ''[y]ou will need a license from BIS to reexport all items subject to the EAR * * * to Libya.'' 15 CFR 746.4 (2003). As discussed above, the parts in the instant case are subject to the EAR by virtue of being of U.S. origin and Mr. Mangelsen and BiB both fit the definition of ''you.'' *See* 15 CFR 772.1; *Id.* at 734.3(a)(1)–(a)(2). The term ''reexport'' means ''an actual shipment or transmission of items subject to the EAR from one foreign country to another foreign country.'' 15 CFR 734.2(b)(4). Thus, if Mr. Mangelsen were to carry out the agreement to its full extent and actually ship the replacement parts from Germany to Libya without a license, the Regulations would be violated.

b. *Knowing Participation and Overt Act.* On February 14, 2002, Mr. Mangelsen, on behalf of BiB, e-mailed Pacific Press advising that the stateside point of contact for domestic delivery of the parts would be Mr. John Clements of Minequip. (Exhibit 11). Subsequently, on April 22, 2002, Mr. Clements called Pacific Press and stated that he was willing to be the exporter for BiB's order, Reference Number 213b102. (Exhibit 14). On April 23, 2002, Pacific Press notified Mr. Mangelsen of the same via e-mail, and on April 26, 2002, Mr. Mangelsen responded via e-mail and agreed that Mr. Clements would act as his domestic agent in obtaining the items destined for Libya. (Id.; Exhibit 9). All of the above actions of Mr. Mangelsen and Mr. Clements are overt acts in furtherance of the conspiracy; in his April 11, 2006 Answer, and throughout the case file, Mr. Mangelsen admitted his knowing participation in the same.

The udersigned, therefore, finds Charge 1 proved by preponderance of the evidence against both Mr. Mangelsen and BiB.

2. Actions to Evade the Regulations' Requirements for Export To Libya

Mr. Mangelsen and the company Respondent, BiB, have been charged under EAR § 764.2(h) with eight counts [7] of taking actions to evade the EAR § 746.4 (2003) license requirement for exporting to Libya. The undersigned finds the first six of the eight counts proved by a preponderance of the evidence against both Mr. Mangelsen and BiB and will analyze them in turn in this part. However, the undersigned does not find the last two counts proved by a preponderance of the evidence against either Mr. Mangelsen or BiB and will analyze them separately in the next part.

The Regulations provide: ''No person may engage in any transaction or take any other actions with intent to evade the provisions of the EAA, the EAR, or any order, license or authorization issued thereunder.'' 15 CFR 764.2(h). Evasion is an ''act of eluding, dodging, or avoiding, or avoiding by artifice.'' Blacks Law Dictionary 554 (6th ed.1990).

a. *Receiving the Spare Parts.* In connection with the above mentioned conspiracy, Mr. Mangelsen and BiB obtained spare parts from a U.S. manufacturer through an intermediary in the United States (Mr. Clements of Minequip) and subsequently in the United Kingdom (Mr. Woodbridge of Sigma) for eventual shipment to Libya. (Exhibit 9). It is patently obvious from the recorded telephone conversations between Mr. Mangelsen and Flanders, and between Mr. Clements and Flanders, that Mangelsen arranged and executed the above referenced routing maneuver in response to Flanders' advice that it would be against U.S. Regulations to export to Europe when the intended destination was Libya. Thus, Mr. Mangelsen's attainment of the spare parts in connection with said routing maneuver was clearly done with the intent to elude, dodge, and avoid the requirement that he obtain a license.

The action of receiving the spare parts after structuring the transaction through a separate U.S. broker and shipping the spare parts to an alleged final destination in Europe, with the intent to evade U.S. Government authorization requirements applicable to exports to Libya, amounted to a violation of Section 764.2(h) of the Regulations by both Mr. Mangelsen and BiB.

b. *Forwarding Requests for Pricing and Shipping Information.* In connection with, and as the above referenced conspiracy discussion

[7] Charges 2–9.

illustrates, on September 30, 2002, Mr. Mangelsen and BiB forwarded to Pacific Press two requests for price and shipping information for spare parts intended for Libya, with no intention of obtaining the required U.S. Government authorization. (Exhibit 18). These requests were Clearly done with the intent to elude, dodge, and avoid the requirement that he obtain a license.

Subsequent to the above mentioned referenced conspiracy, on February 13, 2003, Mr. Mangelsen, on behalf of BiB, asked Mr. Clements at Minequip for pricing and shipping information for additional spare parts by submitting an ''Enquiry'' with BiB reference number 018b302. (Exhibit 20). Thirteen days later on February 26, 2003, Mr. Mangelsen asked Mr. Clements for a further price quotation for parts for Goulds Pump 3171S Series under BiB reference number 077b2051. (Exhibit 21).

On March 11,2003, Mr. Clements placed a recorded telephone call to Mr. Mangelsen wherein Mr. Mangelsen conceded that the items referenced in BiB order numbers 018b302 and 077b2051 were destined for Libya, as was the case with the previous conspiracy. Mr. Mangelsen further detailed how the items would be shipped through Germany and subsequently transshipped to Libya to avoid U.S. Government restrictions on exports to Libya. (Exhibit 22). Consistent with the course of dealings discussed above, Mr. Mangelsen's forwarding of such requests to Pacific Press in connection with said routing maneuver was clearly done with the intent to elude, dodge, and avoid the requirement that he obtain a license.

Over two months later on May 12, 2003, Mr. Mangelsen, on behalf of BiB, requested for Mr. Clements to contact a U.S. company for pricing and shipping information for Cone Crusher and Screen Plant Spare Parts. (Exhibit 25). During the request, Mr. Mangelsen noted that the company previously ''assumed the destination'' of Libya and refused to supply the parts directly to Mr. Mangelsen. (Exhibit 25). This was the exact same concern Flanders expressed to Mangelsen with respect to the above mentioned conspiracy. (Exhibit 10; Exhibit 25). Mangelsen was essentially asking Clements to again act as the domestic contact for the U.S. company as Mr. Clements had done previously for Pacific Press. Consistent with the course of dealings discussed above, Mangelsen made his requests to Clements to create a similar routing maneuver with the intent to elude, dodge, and avoid the requirement that he obtain a license.

By forwarding to Pacific Press all of the above mentioned requests in connection with the conspiracy and with the intent to evade U.S. Government authorization requirements applicable to exports to Libya, Mr. Mangelsen and BiB are each liable for six violations of § 764.2(h) of the Regulations.

3. Actions to Evade the Regulations' Requirements for Export to Libya/Iran

Mr. Mangelsen and the company Respondent, BiB, have been charged under EAR § 764.2(h) with taking two further actions to evade the EAR § 746.4 (2003) license requirement for exporting to Libya. The heading in the charge sheet for Counts 8 and 9 refers to actions to evade the EAR § 746.4 (2003) license requirement for exporting to *Libya*, whereas the supporting allegations, analysis, and exhibits involve actions to evade the EAR § 746.7 license requirement for exporting to *Iran.* The undersigned will analyze these counts under both § 746.4 (2003), for Libya and § 746.7 for Iran and finds that neither charge is proved.

With respect to a charge for actions to evade the EAR § 746.4 (2003) license requirement for exporting to Libya, there is no evidence whatsoever to support the charge. On June 6, 2003, and on an unidentified date, Mr. Mangelsen and BiB forwarded to Mr. Clements two requests for price and shipping information for spare parts. (Exhibit 27; Exhibit 28). The June 6, 2003 request regarded ''TI Kixon and other parts for Iran'' and included the comment ''please can you quote me the following items of Kixon without informing them about the destination.'' (Exhibit 27). The other request regarded ''Foxboro Parts for Iran'' and included the comment ''please can you quote me the following items of Foxboro without informing them of the destination.'' There is nothing in either request to indicate a connection to a shipment to Libya and therefore cannot be regarded as actions to evade the Regulations requiring a license to export to Libya.

With respect to a charge for actions to evade the EAR § 746.7 (the licensing requirement for exporting to Iran), the undersigned does not find to a preponderance of the evidence to conclude that Respondents took actions to evade this Regulation. The EAR provides that ''[n]o person may export or reexport items subject to both the EAR and OFAC's Iranian Transactions Regulations without prior OFAC authorization.'' 15 CFR 746.7. Mr. Mangelsen's requests to Mr. Clements relating to Iran indeed appear quite similar to his previous requests relating to Libya as they both regard prohibited countries. These requests therefore create a fair amount of suspicion Mr. Mangelsen was taking an action to evade the license requirements for exporting to Iran as Mr. Mangelsen previously took actions to evade the license requirements for exporting to Libya. However, BIS has not provided any supporting evidence and has stopped short of proving it is more probable than not said requests were made with the intent to evade the EAR license requirement for exporting to Iran. The undersigned does not find these charges proved.

C. Respondent's Entrapment Defense Is Rejected

On April 11, 2006, Mr. Mangelsen filed an Answer to BIS's March 14, 2006 Memorandum and asserted entrapment as an affirmative defense. He stated that the ''suggestion of Mr. Flanders was a trap to lock Mr. Mangelsen to prison for judging him guilty and issuing a penalty.'' Mr. Mangelsen's entrapment defense is rejected on the merits, and in the alternative, is deemed waived.

1. Rejected on the Merits

To prove entrapment, Mr. Mangelsen must ''establish two related elements: Agency inducement of the crime and a lack of predisposition on the part of the defendant to engage in criminal conduct.'' *In the Matter of Ceaser Electronics, Inc.*, 55 FR 53,016–02 (Dec. 26, 1990) (citing *United States* v. *Jenrette*, 744 F.2d 817 (D.C. Cir. 1984), *cert. denied*, 471 U.S. 1099 (1984)).

With respect to the conspiracy, the undersigned rejects this defense on the basis of Mr. Mangelsen and BiB being predisposed to conspiring to export to Libya without a license. The record shows that, before ever having contact with a Bureau agent, Mr. Mangelsen and BiB reached out to Pacific Press and requested pricing information for a shipment clearly intended for Libya without informing Pacific Press of the intended destination. (Exhibit 7; Exhibit 10 at 1–2). During a telephone call between Mr. Mangelsen and Flanders,[8] Flanders informed Mr. Mangelsen that he discovered the intended destination and that this was a problem. (Exhibit 10 at 1–2). When Flanders asked whether Mr. Mangelsen knew that Libya was the intended destination, Mr. Mangelsen simply giggled and then became elusive. (Exhibit 10 at 2). Once Flanders indicated a willingness to work out a plan to disguise the shipment, Mr. Mangelsen immediately became candid

[8] Flanders was a BIS agent posing as an international compliance director for Pacific Press.

about the intended destination and showed eagerness to take an active role in arranging a routing maneuver to disguise the shipment and avoid obtaining the required license. (Exhibit 10 at 2–4). Someone who was not predisposed to said conspiracy would be more hesitant and less willing to be an active participant. Based on these facts, the undersigned finds that it is more likely than not that Mr. Mangelsen and BiB were predisposed to conspiring to ship to Libya without a license.

With respect to the charges for actions to evade the EAR, the undersigned finds that Mr. Mangelsen and BiB have been unable to establish either prong of the defense. The record shows that Mr. Mangelsen and BiB received parts and sent numerous requests for pricing and shipping information on their own accord with the clear intent to evade the regulations. Thus, no inducement is present. Further, Mr. Mangelsen and BiB were clearly predisposed to taking actions to evade the regulations as they made their initial request to Minequip without disclosing the intended destination of Libya before ever speaking with a Bureau agent and continued to take actions independently of any contact with the Bureau agent. (Exhibit 7; Exhibit 10).

2. Waived

The Regulations are clear that ''[t]he respondent must answer the charging letter within 30 days after being served with notice of the issuance of a charging letter, or within 30 days of the notice of any supplemental or amendment to a charging letter.'' 15 CFR 766.6(a). The Regulations further state that ''[a]ny defense or partial defense not specifically set forth in the answer shall be deemed waived, and evidence thereon may be refused, except for good cause shown.'' 15 CFR 766.6(b). Mr. Mangelsen did not assert entrapment in his July 12, 2005 Answer to the Charging Letter and for the first time asserted this defense in his April 11, 2006 Answer. Mr. Mangelsen did not provide any ''cause'' for submitting this late additional defense and it is therefore deemed waived.

VI. Ultimate Findings of Fact and Conclusions of Law

1. Mr. Mangelsen, BiB, and the subject matter of this proceeding are properly within the jurisdiction of the Bureau of Industry and Security in accordance with the Export Administration Act of 1979 (50 U.S.C.. app. 2401–20) and the Export Administration Regulations (15 CFR 730–74).

2. Mr. Malte Mangelsen is a ''person'' under both 15 CFR 160.1(a) and 15 CFR 772.1 and meets the definition of ''you'' under 15 CFR 772.1.

3. Mr. Mangelsen is therefore a correct party to this proceeding and separately responsible for his actions whether or not acting on behalf of BiB and regardless of his citizenship.

4. BiB is a ''person'' under both 15 CFR 160.1(a) and 15 CFR 772.1 and meets the definition of ''you'' under 15 CFR 772.1.

5. BiB is therefore a correct party to this proceeding and separately responsible for the actions of its managing director Mr. Mangelsen by operation of the doctrine of *Respondeat Superior.*

6. The Bureau has established by a preponderance of the evidence that the Respondents violated § 764.2(d) by forming an agreement with Mr. Clements and subsequently transmitting correspondence related thereto whereby spare parts for a shear press would be reexported to Libya without a license in violation of § 746.4 (2003).

7. The Bureau has established by a preponderance of the evidence that the Respondents violated § 764.2(h) by obtaining spare parts for a shear press in connection with the above mentioned conspiracy whereby said spare parts would be routed through Europe to their eventual destination of Libya to evade the § 746.4 (2003) requirement of obtaining a license to reexport to Libya.

8. The Bureau has established by a preponderance of the evidence that the Respondents violated § 764.2(h) by forwarding to Mr. Clements a request for pricing and shipping information for spare parts intended for Libya on September 30, 2002 to evade the § 746.4 (2003) requirement of obtaining a license to reexport to Libya.

9. The Bureau has established by a preponderance of the evidence that the Respondents violated § 764.2(h) by forwarding to Mr. Clements a second request for pricing and shipping information for spare parts intended for Libya on September 30, 2002 to evade the § 746.4 (2003) requirement of obtaining a license to reexport to Libya.

10. The Bureau has established by a preponderance of the evidence that the Respondents violated § 764.2(h) by forwarding to Mr. Clements a request for pricing and shipping information for spare parts intended for Libya on February 13, 2003 to evade the § 746.4 (2003) requirement of obtaining a license to reexport to Libya.

11. The Bureau has established by a preponderance of the evidence that the Respondents violated § 764.2(h) by forwarding to Mr. Clements a request for pricing and shipping information for spare parts intended for Libya on February 26, 2003 to evade the § 746.4 (2003) requirement of obtaining a license to reexport to Libya.

12. The Bureau has established by a preponderance of the evidence that the Respondents violated § 764.2(h) by asking Mr. Clements to obtain pricing and shipping information from another U.S. Company on behalf of BiB for spare parts intended for Libya on May 12, 2003 to evade the § 746.4 (2003) requirement of obtaining a license to reexport to Libya.

13. The Bureau has not established by a preponderance of the evidence that the Respondents violated § 764.2(h) by forwarding a request to Mr. Clements for pricing and shipping information for spare parts regarding ''TI Kixon and other parts for Iran'' and including the comment ''please can you quote me the following items of Kixon without telling them about the destination'' on June 6, 2003. The Bureau has not established by a preponderance of the evidence that it was done to evade the § 746.4 (2003) requirement of obtaining a license to reexport to Libya or to evade the § 746.7 requirement of obtaining a license to reexport to Iran.

14. The Bureau has not established by a preponderance of the evidence that the Respondents violated § 764.2(h) by forwarding a request to Mr. Clements for pricing and shipping information for spare parts regarding ''Foxboro parts for Iran'' and including the comment ''please can you quote me the following items of Foxboro without telling them about the destination.'' The Bureau has not established by a preponderance of the evidence that it was done to evade the § 746.4 (2003) requirement of obtaining a license to reexport to Libya or to evade the § 746.7 requirement of obtaining a license to reexport to Iran.

VII. Sanction

Based on the gravity of the offenses, the Agency's proposed sanction of a 20 year denial of U.S. export privileges for both Mr. Mangelsen and BiB is appropriate under Part 764.3(a)(2). However, the Agency's proposed sanction of a $99,000 civil penalty for each Mr. Mangelsen and BiB will be reduced. The undersigned found only 7 out of 9 charges proved, and the maximum civil penalty allowed is $11,000 per violation.[9] Therefore, the

[9] *See* 50 U.S.C. app. 2410(c)(1); 15 CFR 6.4(a)(6) (2006); 15 CFR 764.3(a)(1) (2006). It should be noted that the maximum civil penalty has fluctuated during the last decade and that the actual civil penalty for each violation in question could be as high as $12,000. Pursuant to Section 4 of the Federal Civil Penalties Inflation Adjustment Act of 1990, 28 U.S.C. § 2461, as amended by the Debt Collection Improvement Act of 1996, 31 U.S.C.

maximum civil penalty that can be imposed against each Mr. Mangelsen and BiB is $77,000. Despite the fact that the U.S. has since lifted the embargo against Libya, the maximum civil penalty against Mr. Mangelsen and BiB is deemed appropriate.

During the course of Mr. Mangelsen and BiB's violation of the regulations and as is apparent from Mr. Mangelsen'scorrespondence, Mr. Mangelsen has a blatant disregard for U.S. export laws and regulations. He appears to believe he is entitled to avail himself to privileges of exporting from the U.S., but acts as though he need not comply with its laws or regulations. To aggravate this, Mr. Mangelsen and BiB have demonstrated a propensity to disguise their efforts to evade U.S. export laws and regulations. The clear disregard for U.S. export laws and regulations combined with the propensity to disguise efforts to evade the same more than justifies issuing the maximum civil penalty against both Mr. Mangelsen and BiB.

VIII. Recommended Order

[Redacted Section]

Please be advised that under 15 CFR 766.17(b)(2) the administrative law judge shall immediately certify the record, including the original copy of the recommended decision and order, to the Under Secretary for review in accordance with 15 CFR 766.22. Please be further advised that 15 CFR 766.22 is included in Attachment A of this decision.

Done and dated May 23, 2006 at Norfolk, VA.

Peter A. Fitzpatrick,

Administrative Law Judge, U.S. Coast Guard.[10]

[FR Doc. 06–5778 Filed 6–28–06; 8:45 am]

BILLING CODE 3510–33–M

3701, the Agency adjusted the maximum civil penalty for inflation in 1997 from $10,000 to $11,000. 15 CFR 6.4(a)(1) (1997). In 2000, the Agency again adjusted it for inflation from $11,000 to $12,000. *Id.* at § 6.4(a)(6) (2000). It was not until 2003 that the Agency reduced maximum civil penalty from $12,000 to $11,000, where it has since remained. *Id.* at § 6.4(a)(6) (2003–06). While the conduct in question occurred from 2001 to 2003, BIS has indicated that it wishes to seek an $11,000 ''maximum civil penalty.'' The undersigned will therefore treat $11,000 as the maximum civil penalty for the purpose of this action only.

[10] United States Coast Guard Administrative Law Judges perform adjudicatory functions for the Bureau of Industry and Security with approval from the Office of Personnel Management pursuant to a memorandum of understanding between the Coast Guard and the Bureau of Industry and Security.

DEPARTMENT OF COMMERCE

International Trade Administration

A–570–881

Malleable Iron Pipe Fittings From the People's Republic of China: Final Results of Antidumping Duty Administrative Review

AGENCY: Import Administration, International Trade Administration, Department of Commerce.

SUMMARY: On December 23, 2005, the Department of Commerce published the preliminary results of the administrative review of the antidumping duty order on malleable iron pipe fittings from the People's Republic of China. The period of review is December 2, 2003, through November 30, 2004. The administrative review covers four exporters.

We invited interested parties to comment on our preliminary results. Based on our analysis of the comments received, we made certain changes to our calculations. The final dumping margins for this review are listed in the ''Final Results of the Review'' section, below.

EFFECTIVE DATE: June 29, 2006.

FOR FURTHER INFORMATION CONTACT: Juanita H. Chen for Chengde Malleable Iron General Factory and Langfang PanNext Pipe Fitting Co., Ltd., Ryan A. Douglas for SCE Development (Canada) Co., Ltd., or Jennifer Moats for LDR Industries, Inc. and Beijing Sai Lin Ke Hardware Co., Ltd., AD/CVD Operations, Office 8, Import Administration, International Trade Administration, U.S. Department of Commerce, 1401 Constitution Avenue, N.W., Washington, DC 20230; telephone: 202–482–1904, 202–482–1277 and 202–482–5047, respectively.

SUPPLEMENTARY INFORMATION:

Background

On December 23, 2005, the Department of Commerce (''Department'') published the preliminary results of the administrative review of the antidumping duty order on malleable iron pipe fittings (''malleable pipe'') from the People's Republic of China (''PRC''). *See Certain Malleable Iron Pipe Fittings From the People's Republic of China: Notice of Preliminary Results of Antidumping Duty Administrative Review*, 70 FR 76234 (December 23, 2005) (''*Preliminary Results*''). In our *Preliminary Results*, the Department noted we would provide the respondents with additional opportunity to explain the methodology used and to correct certain deficiencies noted in respondents' questionnaire responses and reported data. Accordingly, the Department received supplemental questionnaire responses after the *Preliminary Results* from Langfang PanNext Pipe Fittings Co., Ltd. and its U.S. affiliate, PanNext Fittings Corporation (collectively ''Pannext''), on January 20, and March 27, 2006, from SCE Development (Canada) Co. Ltd. (''SCE'') on March 7, 2006, from Chengde Malleable Iron General Factory (''Chengde'') on March 14, 2006, and from LDR Industries Inc. and Beijing Sai Lin Ke Hardware Co., Ltd. (collectively ''SLK'') on March 15, May 23, and May 30, 2006.

On April 6, 2006, the Department published a notice extending the time limit for the completion of the final results of this review until June 21, 2006. *See Notice of Extension of Time Limit for Final Results of Antidumping Duty Administrative Review: Certain Malleable Iron Pipe Fittings From the People's Republic of China*, 71 FR 17439 (April 6, 2006); *see, also, Notice of Correction to Notice of Extension of Time Limit for Final Results of Antidumpnig Duty Administrative Review: Certain Malleable Iron Pipe Fittings From the People's Republic of China*, 71 FR 25148 (April 28, 2006).

On April 12, 2006, Anvil International, Inc. and Ward Manufacturing (collectively ''the petitioners'') submitted notice that they did not intend to request a hearing in this segment. As there were no requests for a hearing, the Department did not conduct a hearing in this review.

We invited interested parties to comment on our *Preliminary Results*. On May 1, 2006, the Department received case briefs from the petitioners, SLK, and Pannext. On May 8, 2006, we received rebuttal briefs from the petitioners, SLK, and Pannext. Chengde and SCE did not submit case or rebuttal briefs. On May 24, 2006, the petitioners submitted comments on SLK's May 23, 2006, submission; on May 25, 2006, SLK submitted rebuttal comments. The Department learned from the petitioners' case brief that Chengde failed to serve them the proprietary version of its revised March 16, 2006, supplemental questionnaire response or the electronic U.S. sales and factors–of-production (''FOP'') databases. Upon learning of Chengde's lack of proper service, the Department instructed Chengde to serve the petitioners a complete copy of the proprietary version of its response, and provided all interested parties an additional briefing period to comment on this response. We did not receive any comments from

interested parties in response to this briefing opportunity.

We conducted this review in accordance with sections 751 and 777 of the Tariff Act of 1930, as amended (''Act''), and 19 CFR 351.213 and 351.221 (2005).

Period of Review

The period of review (''POR'') is December 2, 2003, through November 30, 2004.

Scope of the Order

For purposes of this order, the products covered are certain malleable iron pipe fittings, cast, other than grooved fittings, from the PRC. The merchandise is currently classifiable under item numbers 7307.19.90.30, 7307.19.90.60 and 7307.19.90.80 of the Harmonized Tariff Schedule of the United States (''HTSUS''). Excluded from the scope of this order are metal compression couplings, which are imported under HTSUS number 7307.19.90.80. A metal compression coupling consists of a coupling body, two gaskets, and two compression nuts. These products range in diameter from ½ inch to 2 inches and are carried only in galvanized finish. Although HTSUS subheadings are provided for convenience and customs purposes, the Department's written description of the scope of this proceeding is dispositive.

Analysis of Comments Received

All issues raised in the post–preliminary comments by parties in this review are addressed in the ''Issues and Decision Memorandum for the Administrative Review of Certain Malleable Iron Pipe Fittings From the People's Republic of China,'' dated June 21, 2006 (''*Issues and Decision Memorandum*''), which is hereby adopted by this notice. A list of the issues which parties raised and to which we respond in the *Issues and Decision Memorandum* follows as an appendix to this notice. The *Issues and Decision Memorandum* is a public document which is on file in the Central Records Unit (''CRU'') in room B–099 of the main Department building, and is accessible on the Web at http://ia.ita.doc.gov/frn/. The paper copy and electronic version of the *Issues and Decision Memorandum* are identical in content.

Separate Rates

In our *Preliminary Results*, we determined that SLK, Pannext, and SCE met the criteria for the application of a separate rate. We preliminarily found the information provided by Chengde to be unreliable; as a result, we preliminarily found Chengde did not qualify for separate rate status and deemed it to be part of the PRC–wide entity. *See Preliminary Results*, 70 FR at 76235. However, we provided Chengde with an additional opportunity to correct deficiencies in its reported data following the *Preliminary Results*. *See Preliminary Results*, 70 FR at 76240. Because we find for these final results that Chengde provided reliable information, as requested by the Department, except as noted below in the ''Facts Otherwise Available'' section, we must establish whether Chengde has met the criteria for the application of a separate rate.

It is the Department's standard policy to assign all exporters of subject merchandise subject to review in a non–market economy (''NME'') country a single rate unless an exporter can demonstrate an absence of government control, both in law (*de jure*) and in fact (*de facto*), with respect to its exports. *See Separate–Rates Practice and Application of Combination Rates in Antidumping Investigations Involving Non–Market Economy Countries*, Policy Bulletin 05.1 (April 5, 2005) (''*Policy Bulletin 05.1*''). To establish whether an exporter is sufficiently independent of government control to be entitled to a separate rate, the Department analyzes the exporter in light of the criteria established in *Final Determination of Sales at Less Than Fair Value: Sparklers from the People's Republic of China*, 56 FR 20588 (May 6, 1991), and accompanying Issues and Decision Memorandum at Comment 1; and *Notice of Final Determination of Sales at Less Than Fair Value: Silicon Carbide from the People's Republic of China*, 59 FR 22585, 22586–7 (May 2, 1994).

Chengde provided the requested separate rate information in its responses to our original and supplemental questionnaires. Accordingly, consistent with the *Notice of Final Determination of Sales at Less Than Fair Value: Bicycles From the People's Republic of China*, 61 FR 19026, 19027–8 (April 30, 1996), we performed a separate rates analysis to determine whether Chengde is independent from government control.

A. Absence of de jure Control

The Department considers the following *de jure* criteria in determining whether an individual company may be granted a separate rate: (1) an absence of restrictive stipulations associated with an individual exporter's business and export licenses; and (2) any legislative enactments decentralizing control of companies.

One of the respondents placed on the record a number of documents to demonstrate absence of *de jure* control including the ''Foreign Trade Law of the People's Republic of China,'' the ''Administrative Regulations of the People's Republic of China Governing the Registration of Legal Corporations,'' and the ''Law of the People's Republic of China on Foreign Capital Enterprises.'' *See Preliminary Results*, 70 FR at 76235. The Department has analyzed such PRC laws and found that they establish an absence of *de jure* control. *See, e.g., Preliminary Results of New Shipper Review: Certain Preserved Mushrooms From the People's Republic of China*, 66 FR 30695, 30696 (June 7, 2001) (unchanged in the final determination *See Final Results of New Shipper Review: Certain Preserved Mushrooms From the People's Republic of China*, 66 FR 45006 (August 27, 2001)). We have no information in this proceeding that would cause us to reconsider this determination. Thus, we believe that the evidence on the record supports a preliminary finding of an absence of *de jure* government control based on: (1) an absence of restrictive stipulations associated with the exporter's business license; and (2) the legal authority on the record decentralizing control over the respondent.

B. Absence of De Facto Control

As stated in previous cases, there is some evidence that certain enactments of the PRC central government have not been implemented uniformly among different sectors and/or jurisdictions in the PRC. *See Final Determination of Sales at Less Than Fair Value: Certain Preserved Mushrooms from the People's Republic of China*, 63 FR 72255 (December 31, 1998). Therefore, the Department has determined that an analysis of *de facto* control is critical in determining whether respondents are, in fact, subject to a degree of government control which would preclude the Department from assigning separate rates. The Department typically considers four factors in evaluating whether each respondent is subject to *de facto* government control of its export functions: (1) whether the exporter sets its own export prices independent of the government and without the approval of a government authority; (2) whether the respondent has the authority to negotiate and sign contracts and other agreements; (3) whether the respondent has autonomy from the government in making decisions regarding the selection of its management; and (4) whether the respondent retains the proceeds of its

export sales and makes independent decisions regarding disposition of profits or financing of losses. *See Policy Bulletin 05.1* at p. 2.

Chengde reports that it is a privately owned company controlled by its board of directors, with no relationship to the national, provincial, or local governments. Chengde also reports: (1) There is no government participation in the setting of its export prices; (2) authorized employees and representatives have the authority to negotiate and bind the company to sell merchandise; (3) the owners select the management of Chengde; and (4) there are no restrictions on the use of Chengde's export revenue, which is reinvested in capital or distributed to the owners, or on its use of foreign currency. Chengde's questionnaire responses do not suggest that pricing is coordinated among exporters. During our analysis of the information on the record, we found no information indicating the existence of government control. Consequently, we determine for these final results that Chengde has met the criteria for the application of a separate rate.

The PRC–Wide Rate and Use of Facts Otherwise Available

Section 776(a)(2) of the Act provides that if an interested party or any other person: (A) withholds information that has been requested by the administering authority; (B) fails to provide such information by the deadlines for the submission of the information or in the form and manner requested, subject to subsections (c)(1) and (e) of section 782 of the Act; (C) significantly impedes a proceeding under this title; or (D) provides such information but the information cannot be verified as provided in section 782(i), the administering authority shall, subject to section 782(d) of the Act, use facts otherwise available in reaching the applicable determination.

Section 782(d) of the Act provides that, if the Department determines that a response to a request for information does not comply with the request, the Department shall promptly inform the person submitting the response of the nature of the deficiency and shall, to the extent practicable, provide that person with an opportunity to remedy or explain the deficiency in light of the time limits established for the completion of the review.

In this administrative review, the Department issued antidumping questionnaires to all respondents on March 14, 2005. We rejected Chengde's questionnaire response on April 29, 2005, because of certain filing format and service deficiencies but provided Chengde with an opportunity to correct the deficiencies and resubmit its response, which it did on

May 18, 2005. In addition, before the *Preliminary Results*, we issued supplemental questionnaires to Chengde on July 20, August 4, and November 23, 2005. We issued a supplemental questionnaire to SLK before the Preliminary Results on July 12, 2005, and allowed SLK to provide corrections to its database on September 12, 2005. As discussed in our *Preliminary Results*, we noted that we would provide Chengde and SLK with an additional opportunity to cure deficiencies after the *Preliminary Results*, and would revisit the facts–available determinations made in the *Preliminary Results* for our final results of review. *See Preliminary Results*, 70 FR at 76238–76240. Thereafter, Chengde provided supplemental responses on December 20, 2005, and March 14, 2006; SLK provided supplemental responses and corrections to its database on March 15, May 23, and May 30, 2006. Accordingly, and pursuant to section 782(d) of the Act, the Department provided Chengde and SLK with opportunities to remedy or explain deficiencies on the record.

The Department has concluded that, within the meaning of section 776(a)(2) of the Act, Chengde and SLK failed to provide certain necessary information in response to the Department's questionnaires and various requests for information. More specifically, we find that Chengde and SLK withheld information or did not provide information to the Department pertaining to various factors of production in the form and manner requested by the Department as discussed further below. *See* section 776(a)(2)(B) of the Act. The lack of these necessary data impeded the conduct of the administrative review consistent with section 776(a)(2)(c) of the Act. A portion of the data provided by these respondents are not reliable or usable and the use of partial facts otherwise available is appropriate.

Section 776(b) of the Act provides that the Department may use an inference adverse to the interests of a party that has failed to cooperate by not acting to the best of its ability to comply with the Department's request for information. *See, also*, Statement of Administrative Action accompanying the Uruguay Round Agreements Act, H. Doc. No. 103–316 at 870 (1994); and *Nippon Steel Corp. v. United States*, 337 F.3d 1373, 1382–83 (Fed. Cir. 2003) (instructing that Commerce should make a showing that ''it is reasonable to conclude that less than full cooperation has been shown''). In determining if the application of adverse facts available (''AFA'') is warranted, the Department may also draw some inferences from a pattern of behavior. *See Reiner Branch GmbH & Co KG v. U.S.*, 2026 F.Supp. 2d 1323, 1337 (CIT 2002). Furthermore, to determine whether the respondent ''cooperated'' by ''acting to the best of its ability'' under section 776(b) of the Act, the Department also considers the accuracy and completeness of submitted information, and whether the respondent has hindered the calculation of accurate dumping margins. *Certain Welded Carbon Steel Pipes and Tubes From Thailand: Final Results of Antidumping Duty Administrative Review*, 62 FR 53808, 53819–53820 (October 16, 1997).

In applying an adverse inference, the Department must consider that a respondent may not be rewarded for failing to cooperate and providing the agency with ''flawed'' information. *See NSM Ltd. v. United States*, 170 F. Supp. 2d 1280, 1312 (C.I.T. 2001). We believe that an adverse inference, applied to Chengde's and SLK's FOP data, would satisfactorily address their insufficient submissions and provide for a result that ''would not benefit [these companies] from [their] lack of cooperation'' in the review. *Id.* at 1312. Accordingly, as discussed further below, we assigned Chengde partial AFA for water and assigned SLK partial AFA for missing packing FOPs for certain reported control numbers (''CONNUMs'').

We conclude that, within the meaning of section 776(b) of the Act, Chengde and SLK failed to cooperate by not acting to the best of their abilities in complying with the Department's requests for information for certain FOPs and that the use of partial AFA is appropriate. After repeated opportunities to provide information, Chengde's and SLK's responses to the Department's questions concerning water and packing FOPs, respectively, contained significant omissions, and overall lack of clarity.

For SLK, we determine it is appropriate to use facts available for certain CONNUMs for which it reported contradictory packing information by reporting different packing FOP usage rates for the same product. For those CONNUMs, we applied, as facts available, the highest usage rate reported for each packing input of that CONNUM to calculate the packing expense for these CONNUMs for the final results. Because SLK's response to our request for a revised packing database remains inadequate with

respect to those CONNUMs for which there are no reported packing FOPs, we determine that it is appropriate to apply facts available with an adverse inference for these CONNUMs. For those CONNUMS for which SLK did not provide any packing FOP information, we applied, as AFA, the highest usage rate reported for each packing input in SLK's response to replace the missing packing FOPs for these CONNUMs in SLK's margin calculations for the final results. *See* Memorandum to the File entitled, ''Analysis for the Final Results of the Administrative Review of the Antidumping Duty Order on Malleable Pipe Iron Fittings from the People's Republic of China: LDR Industries, Inc. and Beijing Sai Lin Ke Hardware Co., Ltd.,'' dated June 21, 2006 (''SLK Final Analysis Memorandum'').

For Chengde, we find that it did not cooperate to the best of its ability to report the water used in its production of subject merchandise. In Chengde's May 14, 2006, submission, it reported all the requested information except for water, which had been consistently reported in its previous submissions. Thus, as a result, the Department applied the highest reported water value from Chengde's previous databases to all reported CONNUMs it sold to the United States during the POR as partial AFA for the final results. *See Issues and Decision Memorandum*, at Comment 18; and Memorandum to the File entitled, ''Analysis Memorandum for the Final Results in the 2003–2004 Administrative Review of the Antidumping Duty Order on Malleable Iron Pipe Fittings from the People's Republic of China: Chengde Malleable Iron General Factory Chengde Final Analysis Memorandum,'' dated June 21, 2006 (''Chengde Final Analysis Memorandum'').

Finally, consistent with the *Preliminary Results*, we continued to apply neutral facts available for one of SLK's suppliers which was unable to provide the Department with FOP information due to extraordinary circumstances. *See Preliminary Results*, 70 FR at 76238. Because of the proprietary nature of this discussion, we can not provide full detail in this notice.[1] We note, however, that for future reviews of this proceeding, all respondents, including SLK, must comply with all requests for information by the Department and, therefore, should maintain the appropriate books and records to comply with these requests. If respondents are unable to comply with such requests, the Department may resort to the use of AFA absent the information on the record that is required by the Department to conduct its proceedings in accordance with section 776(b) the Act.

Section 776(c) of the Act provides that, when the Department relies on facts otherwise available and relies on ''secondary information,'' the Department shall, to the extent practicable, corroborate that information from independent sources that are reasonably at its disposal. In the instant review, the Department is not relying on secondary information, but rather on primary information because the Department is calculating a dumping margin on the basis of the actual FOP experience of the respondents. Therefore, this provision does not apply.

In addition, because we preliminarily determined that Chengde was not entitled to a separate rate and was part of the PRC–wide entity, the PRC–wide entity was under review in the *Preliminary Results*. Because the PRC–wide entity failed to provide requested information in the administrative review, the Department preliminarily determined a dumping margin for the PRC–wide entity using the facts otherwise available on the record, pursuant to section 776(a) of the Act. Furthermore, because we determined that the PRC–wide entity failed to cooperate to the best of its ability, we used an adverse inference in making our decision, pursuant to section 776(b) of the Act.

For the *Preliminary Results*, we revised the PRC–wide rate to 200.24 percent based on SCE's calculated margin in the *Preliminary Results*, as SCE's preliminary margin was the highest margin in this proceeding. For the final results, because all companies for which this review was initiated qualify for separate rates, the PRC–wide entity is not covered by this review. Accordingly, the PRC–wide rate will remain 111.36 percent. *See Final Determination of Sales at Less Than Fair Value and Critical Circumstances: Certain Malleable Iron Pipe Fittings From the People's Republic of China*, 68 FR 61395 (October 28, 2003).

Export Price

For all sales made by Chengde, we based the U.S. price on export price (''EP''), in accordance with section 772(a) of the Act, because the first sale to an unaffiliated purchaser was made prior to importation, and constructed export price (''CEP'') was not otherwise warranted by the facts on the record. We calculated EP based on the packed price from the exporter to the first unaffiliated customer in the United States. We deducted foreign brokerage and handling, foreign inland freight, marine insurance, ocean freight, and U.S. inland freight expenses, where appropriate, from the gross unit price, in accordance with section 772(c) of the Act.

Normal Value

Section 773(c)(1) of the Act provides that, in the case of an NME, the Department shall determine normal value (''NV'') using an FOP methodology if the merchandise is exported from an NME and the information does not permit the calculation of NV using home–market prices, third–country prices, or constructed value under section 773(a) of the Act. Because information on the record does not permit the calculation of NV using home–market prices, third–country prices, or constructed value and no party has argued otherwise, we calculated NV based on FOP in accordance with sections 773(c)(3) and (4) of the Act and 19 CFR 351.408(c).

Other Changes Since the Preliminary Results

Based on our analysis of comments received from interested parties and information on the record of this review, we made changes to the margin calculations for all respondents.

Pannext:

Prior to the *Preliminary Results*, Pannext erroneously reported entered value based on a percentage discount of the U.S. gross price, and not as the absolute entered value. After the *Preliminary Results*, Pannext provided, in response to the Department's supplemental questionnaire, a revised U.S. sales database reporting entered value, where known, on a per–unit (piece) basis. Because we find Pannext's revised entered values to be reliable, for the final results we adjusted Pannext's margin calculation program to use its reported entered values, where appropriate, in accordance with 19 CFR 351.212(b)(1). *See* Memorandum to the File entitled, ''Analysis Memorandum for the Final Results in the 2003–2004 Administrative Review of the Antidumping Duty Order on Malleable Iron Pipe Fittings from the People's Republic of China: Langfang PanNext Pipe Fitting Co., Ltd.,'' dated June 21,

[1] For further information, *see Issues and Decision Memorandum* at Comment 1; *see, also*, the proprietary Memorandum from Jennifer Moats to the File entitled, ''Beijing Sai Lin Ke Hardware Co., Ltd.'s Missing Factors of Production Information from Supplier A,'' dated June 21, 2006, and Exhibit SD6-4 of SLK's August 10, 2005, response (collectively, ''Supplier A Support'').

2006 (''Pannext Final Analysis Memorandum'').

SLK:

We corrected certain clerical errors identified by SLK and the petitioners in their briefs for the final results. *See Issues and Decision Memorandum* at Comments 5, 7, 9, and 19 and SLK Final Analysis Memorandum.

For other respondent–specific calculation changes, *see Issues and Decision Memorandum*; Chengde Final Analysis Memorandum; Pannext Final Analysis Memorandum; ''SLK Final Analysis Memorandum≥; and Memorandum to the File entitled, ''Analysis Memorandum for the Final Results of the 2003–2004 Administrative Review of Antidumping Duty Order on Certain Malleable Iron Pipe Fittings from the People's Republic of China: SCE Development (Canada) Co., Ltd.,'' dated June 21, 2006 (''SCE Final Analysis Memorandum''). Public versions of these memoranda are on file in the CRU.

Surrogate Values:

We revalued several surrogate values used in the *Preliminary Results* due to some minor inadvertent data entry errors. These surrogate values include brokerage and handling, limestone and the limestone inflator, cast–iron scrap, steel scrap, corrugated boxes, tape, wooden pallets (discussed further below), nails, plastic bags, zinc dust, and coal. For a detailed discussion on the revaluation of these surrogate values, *see* Memorandum to the File entitled, ''2003–2004 Administrative Review of the Antidumping Duty Order on Certain Malleable Iron Pipe Fittings from the People's Republic of China: Factors Valuations for the Final Results of the Administrative Review,'' dated June 21, 2006.

For the *Preliminary Results*, we incorrectly calculated the surrogate value for wooden pallets in kilograms, rather than in pieces for certain respondents. For the final results, we calculated the surrogate value for wooden pallets in pieces where appropriate. *See Issues and Decision Memorandum* at Comment 19; Chengde Final Analysis Memorandum; SLK Final Analysis Memorandum; and SCE Final Analysis Memorandum.

Final Results of the Review

The Department determined that the following final dumping margins exist for the period December 2, 2003, through November 30, 2004:

Exporter	Weighted–average percentage margin
Chengde Malleable Iron General Factory	81.64
Langfang Pannext Pipe Fitting Co., Ltd.	6.95
LDR Industries, Inc. and Beijing Sai Lin Ke Hardware Co., Ltd	14.69
SCE Development (Canada) Co., Ltd.	53.64
PRC–wide rate	111.36

The Department will disclose calculations performed for the final results to the parties within five days of the date of publication of this notice in accordance with 19 CFR 351.224(b).

Assessment Rates

The Department will determine, and U.S. Customs and Border Protection (''CBP'') shall assess, antidumping duties on all appropriate entries. The Department will issue, as appropriate, appraisement instructions directly to CBP within 15 days of publication of these final results of administrative review. In accordance with 19 CFR 351.212(b)(1), we calculated an exporter/importer (or customer)-specific assessment rate for the merchandise subject to this review. Where the respondent has reported reliable entered values, we calculated importer (or customer)-specific *ad valorem* rates by aggregating the dumping margins calculated for all U.S. sales to each importer (or customer) and dividing this amount by the total entered value of the sales to each importer (or customer). Where an importer (or customer)-specific *ad valorem* rate is greater than *de minimis*, we will apply the assessment rate to the entered value of the importer's/customer's entries during the review period. Where we do not have entered values for all U.S. sales, we calculated a per–unit assessment rate by aggregating the antidumping duties due for all U.S. sales to each importer (or customer) and dividing this amount by the total quantity sold to that importer (or customer). To determine whether the duty assessment rates are *de minimis*, in accordance with the requirement set forth in 19 CFR 351.106(c)(2), we calculated importer (or customer)-specific *ad valorem* ratios based on the estimated entered value. Where an importer (or customer)-specific *ad valorem* rate is zero or *de minimis*, we will instruct CBP to liquidate appropriate entries without regard to antidumping duties.

Cash–Deposit Requirements

The following cash deposit rates will be effective upon publication of this notice of final results for all shipments of malleable pipe from the PRC entered, or withdrawn from warehouse, for consumption on or after the publication date, as provided for by section 751(a)(1) of the Act: (1) For the above listed respondents, which each have a separate rate, the cash deposit rate will be the company–specific rate indicated above; (2) the cash deposit rates for any other companies that have separate rates established in the investigation, but were not reviewed in this segment, will not change; (3) for all other PRC exporters, the cash deposit rate will be 111.36 percent, the PRC–wide rate established in the *See Final Determination of Sales at Less Than Fair Value and Critical Circumstances: Certain Malleable Iron Pipe Fittings From the People's Republic of China*, 68 FR 61395 (October 28, 2003); and (4) for non–PRC exporters of malleable iron pipe fittings from the PRC, the cash deposit rate will be the rate applicable to the PRC exporter that supplied that exporter. These deposit rates, when imposed, shall remain in effect until publication of the final results of the next administrative review.

Notification to Importers

This notice serves as a final reminder to importers of their responsibility under 19 CFR 351.402(f) to file a certificate regarding the reimbursement of antidumping duties prior to liquidation of the relevant entries during this review period. Pursuant to 19 CFR 351.402(f)(3), failure to comply with this requirement could result in the Secretary's presumption that reimbursement of antidumping duties occurred and the subsequent assessment of doubled antidumping duties.

This notice also serves as a reminder to parties subject to administrative protective order (''APO'') of their responsibility concerning the disposition of proprietary information disclosed under APO, in accordance with 19 CFR 351.305 and as explained in the APO itself. Timely written notification of the return/destruction of APO materials or conversion to judicial protective order is hereby requested. Failure to comply with the regulations and the terms of an APO is a sanctionable violation.

This notice of final results of administrative review is issued and published in accordance with sections 751(a)(1) and 777(i)(1) of the Act.

Dated: June 21, 2006.

David M. Spooner,

Assistant Secretary for Import Administration.

Appendix

List of Comments and Issues in the Decision Memorandum

Comment 1. SLK: Partial Facts Available for Missing Factors of Production
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[FR Doc. E6–10219 Filed 6–28–08; 8:45 am]

BILLING CODE 3510–DS–S

DEPARTMENT OF COMMERCE

International Trade Administration

(C–507–501)

Certain In–shell Pistachios from the Islamic Republic of Iran: Final Results of Countervailing Duty Administrative Review

AGENCY: Import Administration, International Trade Administration, Department of Commerce.

SUMMARY: On February 22, 2006, the Department of Commerce (the Department) published in the **Federal Register** its preliminary results in the countervailing duty (CVD) administrative review of certain in–shell pistachios from Iran. *See Certain In–shell Pistachios from the Islamic Republic of Iran: Preliminary Results of Countervailing Duty Administrative Review*, 71 FR 9091 (*Preliminary Results*). The Department has now completed this administrative review in accordance with section 751(a) of the Tariff Act of 1930, as amended (the Act).

Based on information received since the *Preliminary Results* and our analysis of the comments received, the Department has not revised the net subsidy rate for Tehran Negah Nima Trading Company, Inc., trading as Nima Trading Company (Nima), the respondent company in this proceeding. For further discussion of our positions, *see* the ''Issues and Decision Memorandum'' from Stephen J. Claeys, Deputy Assistant Secretary for Import Administration, to David M. Spooner, Assistant Secretary for Import Administration, concerning the ''Final Results of Countervailing Duty Administrative Review: Certain In–shell Pistachios from the Islamic Republic of Iran'' (Decision Memorandum) dated June 22, 2006. The final net subsidy rate for the reviewed company is listed below in the section entitled ''Final Results of Review.''

EFFECTIVE DATE: June 29, 2006.

FOR FURTHER INFORMATION CONTACT: Darla Brown, AD/CVD Operations, Office 3, Import Administration, U.S. Department of Commerce, Room 4014, 14th Street and Constitution Avenue, NW, Washington, DC 20230; telephone: (202) 482–2786.

SUPPLEMENTARY INFORMATION:

Background

On November 7, 2005, the Department published in the **Federal Register** its *Preliminary Results*. We invited interested parties to comment on these results. Since the preliminary results, we received case briefs from petitioners[1] on March 24, 2006. Neither Nima nor the Government of Iran (GOI) submitted a brief.

In accordance with 19 CFR 351.213(b), this administrative review covers only those producers or exporters for which a review was specifically requested. Accordingly, this administrative review covers Nima for the period of review (POR) January 1, 2004, through December 31, 2004.

Scope of the Order

For purposes of this order, the product covered is in–shell pistachio nuts from which the hulls have been removed, leaving the inner hard shells and edible meat, as currently classifiable in the Harmonized Tariff Schedules of the United States (HTSUS) under item number 0802.50.20.00. The HTSUS subheading is provided for convenience and customs purposes. The written description of the scope is dispositive.

Analysis of Comments Received

For a discussion of the programs and the issues raised in the briefs by parties to this review, *see* the Decision Memorandum, which is hereby adopted by this notice. A listing of the issues which parties raised and to which we have responded, which are in the Decision Memorandum, is attached to this notice as Appendix I. Parties can find a complete discussion of the issues raised in this review and the corresponding recommendations in this public memorandum, which is on file in the Central Records Unit (CRU), room B–099 of the main Commerce building. In addition, a complete version of the Decision Memorandum can be accessed directly on the World Wide Web at *http://ia.ita.doc.gov/frn*. The paper copy and electronic version of the Decision Memorandum are identical in content.

Use of Facts Available

The Department has concluded that the GOI and Nima did not act to the best of their abilities in providing responses to the Department, in accordance with sections 776(a) and 776(b) of the Act. Specifically, neither the GOI nor Nima submitted questionnaire responses to the Department. By failing to respond to our questionnaire, Nima and the GOI have failed to provide information regarding subsidy programs in Iran, as well as Nima's sales, in the manner explicitly requested by the Department. Therefore, we must resort to the facts otherwise available pursuant to section 776(a) of the Act. Furthermore, in selecting from among the facts available, the Department has determined that an adverse inference is warranted, pursuant to section 776(b) of the Act because, despite the Department's efforts, Nima and the GOI did not respond to our questionnaires.

In the instant case, the Department is relying on information from *Final Affirmative Countervailing Duty Determination and Countervailing Duty Order: In–shell Pistachios from Iran*, 51 FR 8344 (March 11, 1986) (*In–shell Pistachios*); *Certain In–Shell Pistachios and Certain Roasted In–Shell Pistachios from the Islamic Republic of Iran: Final Results of New Shipper Countervailing Duty Reviews*, 68 FR 4997 (January 31, 2003) (*Pistachios New Shipper Reviews*); and *Certain In–shell Pistachios from the Islamic Republic of Iran: Final Results*

[1] Petitioners include the California Pistachios Commission (CPC) and its members and a domestic interested party, Cal Pure Pistachios, Inc. (Cal Pure).

of Countervailing Duty Administrative Review, 70 FR 54027 (September 13, 2005) (*2003 In–shell Pistachios*).

If the Department relies on secondary information (*e.g.*, data from a petition) as facts available, section 776(c) of the Act provides that the Department shall, ''to the extent practicable,'' corroborate such information using independent sources reasonably at its disposal.[2] The SAA further provides that to corroborate secondary information means that the Department will satisfy itself that the secondary information to be used has probative value. *See* also 19 CFR 351.308(d) (describing the corroboration of secondary information).

Thus, in those instances in which it determines to apply adverse facts available, the Department, in order to satisfy itself that such information has probative value, will examine, to the extent practicable, the reliability and relevance of the information used. However, unlike other types of information, such as publicly available data on the national inflation rate of a given country or national average interest rates, there typically are no independent sources for data on company–specific benefits resulting from countervailable subsidy programs. The only source for such information normally is administrative determinations. In the instant case, no evidence has been presented or obtained which contradicts the reliability of the evidence relied upon in previous segments of this proceeding.

With respect to the relevance aspect of corroboration, the Department will consider information reasonably at its disposal as to whether there are circumstances that would render benefit data not relevant. Where circumstances indicate that the information is not appropriate as adverse facts available, the Department will not use it. *See Fresh Cut Flowers from Mexico; Final Results of Antidumping Duty Administrative Review*, 61 FR 6812 (February 22, 1996). In the instant case, no evidence has been presented or obtained which contradicts the relevance of the benefit data relied upon in previous segments of this proceeding. Thus, in the instant case, the Department finds that the information used has been corroborated to the extent practicable.

For further discussion, *see* the ''Use of Facts Available'' section of the Decision Memorandum.

[2] The Statement of Administrative Action accompanying the URAA clarifies that information from the petition is ''secondary information.'' *See* Statement of Administrative Action, URAA, H. Doc. No. 316, Vol. 1, 103d Cong. (1994) (SAA) at 870.

Final Results of Review

In accordance with section 777A(e)(1) of the Act and 19 CFR 351.221(b)(5), we calculated an *ad valorem* subsidy rate for Nima, the only producer/exporter subject to this review, for the POR, calendar year 2004.

Producer/Exporter	Net Subsidy Rate
Tehran Negah Nima Trading Company, Inc., trading as Nima Trading Company (Nima)	71.10 percent *ad valorem*

As Nima is the exporter but not the producer of subject merchandise, the Department's final results of review apply only to subject merchandise exported by Nima and produced by any company which produces the subject merchandise. *See* 19 CFR 351.107(b) (providing that the Department may establish a combination rate for each combination of exporter and its supplying producer).

Therefore, we will issue the following cash deposit requirements, within 15 days of publication of the final results of the instant review, for all shipments of subject merchandise entered, or withdrawn from warehouse, for consumption on or after the date of publication: (1) For merchandise exported by Nima, the cash deposit rate will be 71.10 percent *ad valorem, i.e.*, the rate calculated in the final results of the instant administrative review; (2) if the exporter is not a firm covered in this review, a prior review, or the original CVD investigation, but the producer is, the cash deposit rate will be the rate established for the most recent period for the producer of the merchandise; and (3) if neither the exporter nor producer is a firm covered in this review, a prior review, or the original investigation, the cash deposit rate will continue to be 99.52 percent *ad valorem*, the ''All Others'' rate from the final determination in the original investigation.

This notice also serves as a reminder to parties subject to administrative protective order (APO) of their responsibility concerning the disposition of proprietary information disclosed under APO in accordance with 19 CFR 351.305(a)(3). Timely written notification of return/destruction of APO materials or conversion to judicial protective order is hereby requested. Failure to comply with the regulations and the terms of an APO is a sanctionable violation.

This administrative review and notice are issued and published in accordance with sections 751(a)(1), 751(a)(3) and 777(i)(1) of the Act and 19 CFR 351.221(b)(5).

Dated: June 22, 2006.

David M. Spooner,

Assistant Secretary for Import Administration.

Appendix I - Issues and Decision Memorandum

I. Methodology and Background Information
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II. Analysis of Programs
Programs Determined to Be Countervailable
1. Provision of Fertilizer and Machinery
2. Provision of Credit
3. Tax Exemptions
4. Provision of Water and Irrigation Equipment
5. Technical Support
6. Duty Refunds on Imported Raw or Intermediate Materials Used in the Production of Export Goods
7. Program to Improve Quality of Exports of Dried Fruit
8. Iranian Export Guarantee Fund
9. GOI Grants and Loans to Pistachio Farmers
10. Crop Insurance for Pistachios
III. Total Ad Valorem Rate
IV. Analysis of Comments
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[FR Doc. E6–10223 Filed 6–28–06; 8:45 am]
BILLING CODE 3510–DS–S

DEPARTMENT OF COMMERCE

National Oceanic and Atmospheric Administration

Evaluation of State Coastal Management Programs and National Estuarine Research Reserves

AGENCY: National Oceanic and Atmospheric Administration (NOAA), Office of Ocean and Coastal Resource Management, National Ocean Service, Commerce.

ACTION: Notice of Intent to Evaluate and Notice of Availability of Final Findings.

SUMMARY: The NOAA Office of Ocean and Coastal Resource Management (OCRM) announces its intent to evaluate the performances of the Old Woman Creek (Ohio) National Estuarine Research Reserve, the Connecticut Coastal Management Program, and the New Hampshire Coastal Management Program.

The Coastal Zone Management Program evaluations will be conducted

pursuant to section 312 of the Coastal Zone Management Act of 1972, as amended (CZMA) and regulations at 15 CFR part 923, subpart L. The National Estuarine Research Reserve evaluation will be conducted pursuant to sections 312 and 315 of the CZMA and regulations at 15 CFR part 921, subpart E and part 923, subpart L. The CZMA requires continuing review of the performance of states with respect to coastal program implementation. Evaluation of Coastal Management Programs and National Estuarine Research Reserves requires findings concerning the extent to which a state has met the national objectives, adhered to its Coastal Management Program document or Reserve final management plan approved by the Secretary of Commerce, and adhered to the terms of financial assistance awards funded under the CZMA.

Each evaluation will include a site visit, consideration of public comments, and consultations with interested Federal, state, and local agencies and members of the public. A public meeting will be held as part of the site visit. Notice is hereby given of the dates of the site visits for the listed evaluations, and the dates, local times, and locations of the public meeting during the site visits.

DATES: The Old Woman Creek (Ohio) National Estuarine Research Reserve evaluation site visit will be held August 14–17, 2006. One public meeting will be held during the week. The public meeting will be held on Tuesday, August 15, 2006, at 7 p.m. at the Old Woman Creek National Estuarine Research Reserve Visitor Center, Exhibit Hall, 2514 Cleveland Road, East, Huron, Ohio.

The Connecticut Coastal Management Program evaluation site visit will be held September 11–15, 2006. One public meeting will be held during the week. The public meeting will be held on Tuesday, September 12, 2006, at 7 p.m. at the Department of Environmental Protection, Marine Headquarters, Conference Room (Building 3), 333 Ferry Road, Old Lyme, Connecticut.

The New Hampshire Coastal Management Program evaluation site visit will be held September 20–22, 2006. One public meeting will be held during the week. The public meeting will be held on Wednesday, September 20, 2006, at 5 p.m. at the New Hampshire Coastal Program Office, Department of Environmental Services, 50 International Drive, Suite 200, Portsmouth, New Hampshire.

ADDRESSES: Copies of states' most recent performance reports, as well as OCRM's evaluation notification and supplemental information request letters to the states, are available upon request from OCRM. Written comments from interested parties regarding these Programs are encouraged and will be accepted until 15 days after the public meeting held for a Program. Please direct written comments to Ralph Cantral, Chief, National Policy and Evaluation Division, Office of Ocean and Coastal Resource Management, NOS/NOAA, 1305 East-West Highway, 10th Floor, N/ORM7, Silver Spring, Maryland 20910. When the evaluations are completed, OCRM will place a notice in the **Federal Register** announcing the availability of the Final Evaluation Findings.

SUPPLEMENTARY INFORMATION: Notice is hereby given of the availability of the final evaluation findings for the Pennsylvania and California Coastal Management Programs (CMPs) and the Sapelo Island (Georgia), Chesapeake Bay-Maryland, and Rookery Bay (Florida) National Estuarine Research Reserves (NERRs). Sections 312 and 315 of the Coastal Zone Management Act of 1972 (CZMA), as amended, require a continuing review of the performance of coastal states with respect to approval of CMPs and the operation and management of NERRs.

The states of Pennsylvania and California were found to be implementing and enforcing their federally approved coastal management programs, addressing the national coastal management objectives identified in CZMA section 303(2)(A)–(K), and adhering to the programmatic terms of their financial assistance awards. The Sapelo Island (Georgia), Chesapeake Bay-Maryland, and Rookery Bay (Florida) NERRs were found to be adhering to programmatic requirements of the NERR System.

Copies of these final evaluation findings may be obtained upon written request from: Ralph Cantral, Chief, National Policy and Evaluation Division, Office of Ocean and Coastal Resource Management, NOS/NOAA, 1305 East-West Highway, 10th Floor, N/ORM7, Silver Spring, Maryland 20910, or *Ralph.Cantral@noaa.gov.*

FOR FURTHER INFORMATION CONTACT: Ralph Cantral, Chief, National Policy and Evaluation Division, Office of Ocean and Coastal Resource Management, NOS/NOAA, 1305 East-West Highway, 10th Floor, N/ORM7, Silver Spring, Maryland 20910, (301) 563–7118.

Federal Domestic Assistance Catalog 11.419 Coastal Zone Management Program Administration

Dated: June 23, 2006.

Elizabeth Scheffler,

Chief Financial Officer, Management and Budget Office, National Ocean Service, National Oceanic and Atmospheric Administration.

[FR Doc. 06–5826 Filed 6–28–06; 8:45 am]

BILLING CODE 3510–08–P

DEPARTMENT OF COMMERCE

National Oceanic and Atmospheric Administration

Availability of Seats for the Stellwagen Bank National Marine Sanctuary Advisory Council

AGENCY: National Marine Sanctuary Program (NMSP), National Ocean Service (NOS), National Oceanic and Atmospheric Administration, Department of Commerce (DOC).

ACTION: Notice and request for applications.

SUMMARY: The Stellwagen Bank National Marine Sanctuary (SBNMS or Sanctuary) is seeking applicants for the following vacant seats on its Sanctuary Advisory Council (Council): Conservation (Alternate) and At-Large (Member). Applicants are chosen based upon their particular expertise and experience in relation to the seat for which they are applying; community and professional affiliations; philosophy regarding the protection and management of marine resources; and possibly the length of residence in the area affected by the Sanctuary. Applicants who are chosen as members should expect to serve two-year terms, pursuant to the Council's Charter.

DATES: Applications are due by August 15, 2006.

ADDRESSES: Application kits may be obtained from *Ruthetta.Halbower@noaa.gov*, 175 Edward Foster Road, Scituate, MA 02066. Telephone 781–545–8026 X201. Completed applications should be sent to the same address.

FOR FURTHER INFORMATION CONTACT: Nathalie Ward, SAC Coordinator 175 Edward Foster Road, Scituate, MA 02066 *nathalie.ward@noaa.gov* Tel: 781–545–8026.

SUPPLEMENTARY INFORMATION: The Stellwagen Bank National Marine Sanctuary Advisory Council was established in March 2001 to assure continued public participation in the management of the Sanctuary. Serving in a volunteer capacity, the Advisory Council's 21 voting members represent

a variety of local user groups, as well as the general public, plus seven local, state and federal government jurisdictions. Since its establishment, the Advisory Council has played a vital role in advising the Sanctuary and NOAA on critical issues and is currently focused on the sanctuary's development of a new 5-year management plan.

The Stellwagen Bank National Marine Sanctuary encompasses 842 square miles of ocean, stretching between Cape Ann and Cape Cod. Renowned for its scenic beauty and remarkable productivity, the sanctuary supports a rich diversity of marine life including marine mammals, more than 30 species of seabirds, over 100 species of fishes, and hundreds of marine invertebrates and plants.

Authority: 16 U.S.C. 1431, et seq.

(Federal Domestic Assistance Catalog Number 11.429 Marine Sanctuary Program)

Dated: June 20, 2006.

Daniel J. Basta,

Director, National Marine Sanctuary Program, National Ocean Services, National Oceanic and Atmospheric Administration.

[FR Doc. 06–5783 Filed 6–28–06; 8:45 am]

BILLING CODE 3510–NK–M

DEPARTMENT OF COMMERCE

National Oceanic and Atmospheric Administration

[I.D. 062306A]

Magnuson-Stevens Act Provisions; General Provisions for Domestic Fisheries; Application for Exempted Fishing Permits

AGENCY: National Marine Fisheries Service (NMFS), National Oceanic and Atmospheric Administration (NOAA), Commerce.

ACTION: Notice; proposal for an exempted fishing permit to conduct experimental fishing; request for comments.

SUMMARY: The Administrator, Northeast Region, NMFS (Regional Administrator) has made a preliminary determination that the subject exempted fishing permit (EFP) application from the East Coast Pelagic Association (ECPA) that would allow herring vessels to possess haddock while testing modified mid-water herring trawls designed to reduce haddock bycatch contains all the required information and warrants further consideration. The Regional Administrator has also made a preliminary determination that the activities authorized under the EFP would be consistent with the goals and objectives of the Atlantic Herring and Northeast (NE) Multispecies Fishery Management Plans (FMPs). However, further review and consultation may be necessary before a final determination is made to issue the EFP.

DATES: Comments on this document must be received on or before July 14, 2006.

ADDRESSES: Comments on this notice may be submitted by e-mail. The mailbox address for providing e-mail comments is *DA6–161@noaa.gov*. Include in the subject line of the e-mail comment the following document identifier: ''Comments on ECPA EFP Proposal for Modifications to Herring Midwater Trawls to Increase Escapement of Non-Target Species.'' Written comments should be sent to Patricia A. Kurkul, Regional Administrator, NMFS, Northeast Regional Office, 1 Blackburn Drive, Gloucester, MA 01930. Mark the outside of the envelope, ''Comments on ECPA EFP Proposal for Modifications to Herring Midwater Trawls to Increase Escapement of Non-Target Species.'' Comments may also be sent via facsimile (fax) to (978) 281–9135.

FOR FURTHER INFORMATION CONTACT: Ryan Silva, Fishery Management Specialist, phone: 978–281–9326, fax: 978–281–9135.

SUPPLEMENTARY INFORMATION: As part of an experiment titled, ''Research Project to Examine Modifications to Herring Midwater Trawls to Increase Escapement of non-target species (i.e., haddock),'' exempted vessels would test trawl modifications designed to reduce haddock bycatch in the herring fishery and research the vertical distribution and behavior of herring and haddock during the seasonal and spatial overlap that occurs between these species on Georges Bank. The experiment is being coordinated by the Gulf of Maine Research Institute (GMRI) on behalf of several research partners. The EFP application was submitted by one of the project partners, the ECPA. If approved, the EFP would authorize participating vessels to possess haddock during research activities. Haddock would not be marketed for human consumption. All catch of herring would be reported and accounted for through vessel trip reports (VTR) and interactive voice reporting (IVR). Incidental catch of haddock would be estimated using the NMFS Observer Program sampling protocols established for the herring fishery, and reported to NMFS following each research trip. Both herring and haddock catch would be deducted from the total allowable catch (TAC) specifications for herring Management Area 3 and the 0.2 percent haddock TAC as proposed in Framework 43 to the NE Multispecies FMP, respectively. The herring catch for this project is estimated at 3,500 - 5,000 mt. The 2006 haddock catch cap allocated to the herring fishery under Framework 43 is 73.2 mt (161,377 lb). If the overall haddock catch cap is harvested, the project would be stopped.

The applicant intends to compare bycatch rates of 2 modified trawl designs and a standard midwater herring trawl. At any given time during the requested 26 research days, up to 4 vessels would conduct normal fishing activity in herring Management Area 3. Nets would be deployed by a combination of vessels, including up to two sets of midwater pair trawl vessels and two single midwater trawl vessels. The number of tows made per day would be dependent on weather, proper gear deployment and availability of herring, but can be estimated at 3–5 per day. Average duration of each tow is 3–4 hours at an estimated speed of 3.5 - 4 knots. In addition, participating vessels would research the vertical distribution and reaction behavior of herring and haddock during the seasonal and spatial overlap that occurs between these species on Georges Bank. Research is proposed for the period July 15 - October 30, 2006.

Regulations under the Magnuson-Stevens Fishery Conservation and Management Act require publication of this notification to provide interested parties the opportunity to comment on applications for proposed EFPs. The applicant may place requests for minor modifications and extensions to the EFP throughout the year. EFP modifications and extensions may be granted without further notice if they are deemed essential to facilitate completion of the proposed research and minimal so as not to change the scope or impact of the initially approved EFP request.

Authority: 16 U.S.C. 1801 *et seq.*

Dated: June 23, 2006.

James P. Burgess,

Acting Director, Office of Sustainable Fisheries, National Marine Fisheries Service.

[FR Doc. E6–10190 Filed 6–28–06; 8:45 am]

BILLING CODE 3510–22–S

DEPARTMENT OF COMMERCE

National Oceanic and Atmospheric Administration

[I.D. 061906A]

Marine Mammals; File No. 984–1814

AGENCY: National Marine Fisheries Service (NMFS), National Oceanic and Atmospheric Administration (NOAA), Commerce.

ACTION: Notice; issuance of permit.

SUMMARY: Notice is hereby given that Dr. Terrie Williams, Department of Ecology and Evolutionary Biology, Center for Ocean Health - Long Marine Laboratory, University of California, 100 Shaffer Road, Santa Cruz, CA 95060 has been issued a permit to conduct research on Weddell seals (*Leptonychotes weddellii*).

ADDRESSES: The permit and related documents are available for review upon written request or by appointment in the following office(s):

Permits, Conservation and Education Division, Office of Protected Resources, NMFS, 1315 East-West Highway, Room 13705, Silver Spring, MD 20910; phone (301)713–2289; fax (301)427–2521; and

Southwest Region, NMFS, 501 West Ocean Blvd., Suite 4200, Long Beach, CA 90802–4213; phone (562)980–4001; fax (562)980–4018.

FOR FURTHER INFORMATION CONTACT: Kate Swails or Tammy Adams, (301)713–2289.

SUPPLEMENTARY INFORMATION: On January 17, 2006 notice was published in the **Federal Register** (71 FR 2527) that a request for a scientific research permit to take the species identified above had been submitted by the above-named individual. The requested permit has been issued under the authority of the Marine Mammal Protection Act of 1972, as amended (16 U.S.C. 1361 *et seq.*), and the Regulations Governing the Taking and Importing of Marine Mammals (50 CFR part 216).

The applicant will capture up to 20 adults and disturb up to 40 adults annually. The animals will have a data logger/video system attached, muscle biopsies and blood samples collected, and blubber thickness measured. Study results are expected to increase understanding of the foraging behavior of this marine mammal species. The animals will be recaptured up to three times to remove or tend to the instruments. The permit also authorizes research-related mortality of up to two seals per year. The permit is issued for five years.

In compliance with the National Environmental Policy Act of 1969 (42 U.S.C. 4321 *et seq.*), a final determination has been made that the activity proposed is categorically excluded from the requirement to prepare an environmental assessment or environmental impact statement.

Dated: June 22, 2006.

P. Michael Payne,

Chief, Permits, Conservation and Education Division, Office of Protected Resources, National Marine Fisheries Service.

[FR Doc. 06–5814 Filed 6–28–06; 8:45 am]

BILLING CODE 3510–22–S

DEPARTMENT OF COMMERCE

National Oceanic and Atmospheric Administration

[I.D. 062106A]

Marine Mammals; File Nos. 1034–1854 and 1070–1783

AGENCY: National Marine Fisheries Service (NMFS), National Oceanic and Atmospheric Administration (NOAA), Commerce.

ACTION: Notice; receipt of applications.

SUMMARY: Notice is hereby given that applications have been received for a permit and a permit amendment for scientific research on marine mammals.

DATES: Written, telefaxed, or e-mail comments must be received on or before July 31, 2006.

ADDRESSES: The applications and related documents are available for review upon written request or by appointment in the following office(s):

Permits, Conservation and Education Division, Office of Protected Resources, NMFS, 1315 East-West Highway, Room 13705, Silver Spring, MD 20910; phone (301)713–2289; fax (301)427–2521;

Northwest Region, NMFS, 7600 Sand Point Way NE, BIN C15700, Bldg. 1, Seattle, WA 98115–0700; phone (206)526–6150; fax (206)526–6426; and

Southwest Region, NMFS, 501 West Ocean Blvd., Suite 4200, Long Beach, CA 90802–4213; phone (562)980–4001; fax (562)980–4018.

Written comments or requests for a public hearing on these applications should be submitted to the Chief, Permits, Conservation and Education Division, F/PR1, Office of Protected Resources, NMFS, 1315 East-West Highway, Room 13705, Silver Spring, MD 20910. Those individuals requesting a hearing should set forth the specific reasons why a hearing would be appropriate.

Comments may also be submitted by facsimile at (301)427–2521, provided the facsimile is confirmed by hard copy submitted by mail and postmarked no later than the closing date of the comment period.

Comments may also be submitted by e-mail. The mailbox address for providing email comments is *NMFS.Pr1Comments@noaa.gov*. Include in the subject line of the e-mail comment the following document identifier, as applicable: File No. 1034–1854 or 1070–1783.

FOR FURTHER INFORMATION CONTACT: Amy Sloan or Tammy Adams, (301)713–2289.

SUPPLEMENTARY INFORMATION: The subject permit (File No. 1034–1854) and amendment to Permit No. 1070–1783 are requested under the authority of the Marine Mammal Protection Act of 1972, as amended (16 U.S.C. 1361 *et seq.*), and the Regulations Governing the Taking and Importing of Marine Mammals (50 CFR part 216).

File No. 1034–1854: Dr. Markus Horning, Department of Fisheries & Wildlife, Oregon State University, Hatfield Marine Science Center, 2030 SE Marine Science Drive, Newport, OR 97365, has applied for a permit to conduct research on Weddell seals (*Leptonychotes weddellii*) to study aging; and specifically, to compare oxygen handling, body condition, muscle physiology, and foraging behavior in young adults and old adults. Over a 2–year period, up to 48 animals would have some or all of the following procedures performed: capture, sedation; morphometrics; ultrasound; blood and muscle samples taken; administration of Evans blue dye and deuterium oxide; external data recorders attached to pelage and internal data recorders administered by gavage; release; recapture to add device to manipulate energy expenditure; and recapture to remove instruments. Up to 250 animals seals would be incidentally harassed during these activities. Samples would be imported into the U.S. for analyses. A 5–year permit is requested to accommodate potential future studies and import of additional samples.

File No. 1070–1783: Dr. Alejandro Acevedo-Gutierrez, Biology Department, Western Washington University, Bellingham, WA 98225–9160, has requested an amendment to Permit No. 1070–1783 for research on seals in Washington. This permit, issued on March 13, 2006 (71 FR 14503), authorizes aerial and vessel surveys of harbor seals (*Phoca vitulina*) and fecal sample collections from rookeries and haul-out sites in inland waters of Washington. The permit holder requests

authorization to (1) increase the number of seals harassed in Padilla and Samish Bays (from 1500 to 2000 with 20 takes per seal in 2006, and to 4000 with 20 takes per seal per year from 2007 to 2010); and (2) extend the location of the research to include a floating dock used as a haul-out in Drayton Harbor, with up to 4800 harbor seals harassed (48 times per seal per year) at this location from 2006 to 2010. The purposes of this amendment request are to increase the sample size to provide a more robust sample size and extend the location of research to include seals throughout the region. The amendment would be valid for the duration of the permit, which expires on March 31, 2011.

Concurrent with the publication of this notice in the **Federal Register**, NMFS is forwarding copies of these applications to the Marine Mammal Commission and its Committee of Scientific Advisors.

Dated: June 22, 2006.

P. Michael Payne,

Chief, Permits, Conservation and Education Division, Office of Protected Resources, National Marine Fisheries Service.

[FR Doc. 06–5815 Filed 6–28–06; 8:45 am]

BILLING CODE 3510–22–S

DELAWARE RIVER BASIN COMMISSION

Notice of Commission Meeting and Public Hearing

Notice is hereby given that the Delaware River Basin Commission will hold an informal conference followed by a public hearing on Wednesday, July 19, 2006. The hearing will be part of the Commission's regular business meeting. Both the conference session and business meeting are open to the public and will be held at the Commission's office building, located at 25 State Police Drive in West Trenton, New Jersey.

The conference among the commissioners and staff will begin at 10:15 a.m. Topics of discussion will include: A presentation by a representative of the Philadelphia District of the U.S. Army Corps of Engineers on the work plan for a $1 million grant to the District by the Assistant Secretary of the Army to enhance multi-jurisdictional use and management of the water resources of the Delaware Basin; a presentation by Dr. Anthony J. Broccoli of Rutgers University on climate change and sea level rise; a presentation by Robert Molzahn of the Water Resources Association of the Delaware River Basin and David Sayers of the DRBC on a recommended policy for water transfers, and a presentation on the report and recommendations of the Commission's TMDL Implementation Advisory Committee on reducing loadings of PCBs to the Delaware Estuary.

The subjects of the public hearing to be held during the 1:30 p.m. business meeting include the dockets listed below:

1. *City of Harrington D–88–27 CP–3.* An application for the renewal of a ground water withdrawal project to continue withdrawal of 21 mg/30 days to supply the applicant's public water supply distribution system from existing Wells Nos. 1, 2, 3 and 4 in the Frederica Aquifer. The project is located in the Browns Branch Watershed in the City of Harrington, Kent County, Delaware.

2. *Joseph Jackewicz, Sr. D–91–53–2.* An application for the renewal of a ground and surface water withdrawal project to continue withdrawal of 219.8 million gallons per thirty days (mg/30 days) to supply the applicant's agricultural irrigation system from replacement Well No. Townsend 3, eight existing wells and one existing surface water intake. The project is located in the Tidbury Creek, Cypress Branch and Double Run watersheds in the Town of Magnolia, Kent County, Delaware.

3. *Borough of Richland D–92–1 CP–2.* An application for the renewal of a ground water withdrawal project to continue withdrawal of 5.2 mg/30 days to supply the applicant's public water supply distribution system from existing Wells Nos. 1, 2, 3, 4 and 5 and new Well No. 6 in the Stonehenge, Millbach, Hardyston and Crystalline Rock formations. The project is located in the Mill Creek Watershed in Richland Borough, Lebanon County, Pennsylvania.

4. *Evesham Municipal Utilities Authority D–98–15 CP–1.* An application for approval of a ground water withdrawal project to continue to supply up to 149 mg/30 days of water to the applicant's distribution system through new Aquifer-Storage-Recovery Well No. 14 and existing wells Nos. 4 through 13 without an increase in existing allocation. The project is located in the Rancocas Creek Watershed in Evesham Township, Burlington County, New Jersey. (This was NAR'd as D–98–15 CP.)

5. *Pennsylvania American Water Company D–2003–32 CP.* An application for approval of a ground water withdrawal project to supply up to 4.32 mg/30 days of water to the applicant's public water supply distribution system from new Well No. DG–13 in the Brunswick Formation, and to retain the existing withdrawal from all wells to 29.14 mg/30 days. The project is located in the Schuylkill River watershed in Amity Township, Berks County, Pennsylvania.

6. *Horsehead Corporation D–67–196–2.* An application for a change of ownership and a docket modification for the discharge of non-contact cooling water. The discharges of approximately 0.15 million gallons per day (mgd) from Outfall 004 and 0.31 mgd from Outfall 005 are associated with recycling electric arc furnace dust and the production of metal powders. The discharges from Outfall 004 and Outfall 005 are to the Aquashicola Creek, a tributary to the Lehigh River. The facility is located in Palmerton Borough, Carbon County, Pennsylvania.

7. *Delaware Department of Natural Resources and Environmental Control (DNREC) D–84–10 CP–4.* An application to amend the DRBC Comprehensive Plan and to revise Docket No. D–84–10 CP (Supplement No. 1), Water Supply Plan for northern New Castle County, Delaware. The applicant proposes to delete Churchman's Marsh and Thompson Station Reservoirs and the development of additional ground water supplies at the Delaplane Manor well site from the Comprehensive Plan, and incorporate into the Comprehensive Plan the projects identified in Tables 5.2 and 5.4 in the Eighth Progress Report of the Delaware Water Supply Coordinating Council, dated March 8, 2006.

8. *Bart Golf Club, Inc. D–92–24–2.* An application for renewal of a surface water withdrawal project to supply up to 11.0 million gallons per thirty days of water for supplemental irrigation of the applicant's Hickory Valley Golf Club from an existing surface water intake located on Swamp Creek at the confluence of Schlegel Run. The allocation is a reduction from the previous allocation of 15 mg/30 days. The project is located in the Swamp Creek Watershed in New Hanover Township, Montgomery County, Pennsylvania and is located in the Southeastern Pennsylvania Ground Water Protected Area.

9. *Bridgeport Disposal, LLC D–93–63–2.* An application to update and renew an existing industrial wastewater treatment plant (IWTP) discharge docket. The former commercial hazardous waste treatment facility still includes an on-site biological treatment system and a groundwater and leachate treatment system. The docket renewal will reflect changes in operations since the facility ceased in 2001 to serve as a commercial hazardous waste treatment facility. The IWTP discharges

approximately 0.47 mgd of treated wastewater through a subsurface diffuser to Raccoon Creek, a tributary to Water Quality Zone 4 of the Delaware River. The facility is located in Bridgeport, Gloucester County, New Jersey.

10. *Town of Smyrna D–93–72 CP–2.* An application to replace the withdrawal of water from Well No. 1A in the applicant's water supply system because it has become an unreliable source of supply. The applicant requests that the withdrawal from replacement Well No. 3 and existing Wells Nos. 1 and 2A be increased from 33.99 mg/30 days to 40 mg/30 days in order to meet projected increases in service area demand. The project is located in the Columbia/Cheswold Formation in the Smyrna River Watershed in the Town of Smyrna, Kent County, Delaware.

11. *North Coventry Municipal Authority D–97–1 CP–2.* An application to expand the docket holder's existing waste water treatment plant (WWTP) from 1.5 million gallons per day (mgd) to 2.01 mgd. The project includes the addition of new screening facilities, increased aeration, an additional clarifier and two new aerobic digesters. The WWTP discharges approximately 0.7 mgd to the Schuylkill River. The facility is located in North Coventry Township, Chester County, Pennsylvania.

12. *Green-Waltz Water Company/ Nestle Waters North America Inc. D–98–55–3.* An application for approval of a ground water withdrawal project to supply up to 4.8 mg/30 days of water for bulk water supply to the applicant's bottling plant from new Spring Water Borehole B–2, in the Martinsburg Formation. The applicant has requested an increase in total allocation from 11.7 mg/30 days to 16.5 mg/30 days. The project is located in the Waltz Creek Watershed in Washington Township, Northampton County, Pennsylvania.

13. *Ricci Bros. Sand Co., Inc., D–2005–10–1.* An application for approval of a surface water withdrawal project to supply up to 182.0 mg/30 days from four existing and one proposed surface water intakes for sand and gravel processing. The surface water intakes are located on a former mining pond which is in connection with and fed by groundwater. The intakes provide water to process the sand and gravel in a loop system which recycles approximately 90% of the water back to the pond. The allocation will be limited to 182.0 mg/30 days. The project is located in the Dividing Creek Watershed in Commercial and Downe Townships, Cumberland County, New Jersey.

14. *Green Walk Trout Hatchery D–2006–8–1.* An application for approval of a ground water withdrawal project to supply up to 12.96 mg/30 days of water to the applicant's commercial trout hatchery from existing Wells Nos. W–2, W–5 and W–6. The total allocation will be limited to 12.96 mg/30 days. Ground water withdrawals will be used to augment the flow of Greenwalk Creek and provide cold, oxygenated water to the applicant's trout stocking facility. The project is located in the Waltz Creek Watershed in Washington Township, Northampton County, Pennsylvania.

15. *Bedminster Municipal Authority D–2006–10 CP–1.* An application for the construction of a new .06 mgd WWTP, a new sewer collection system and sewage pumping station and a force main to service a proposed 217-unit single family home subdivision. The Pennland Farm WWTP will discharge to an unnamed tributary of Deep Run Creek, which is a tributary to the Tohickon Creek, tributary to the Lower Delaware River Special Protection Waters. The facility will be located in Bedminster Township, Bucks County, Pennsylvania.

16. *Tidewater Utilities, Inc. D–2006–12 CP–1.* An application for approval of a ground water withdrawal project to supply up to 5.99 mg/30 days of water to meet the demands of the applicant's East District public water supply distribution system from new Wells MV–01, MV–02, VM–01 and VM–02R. The project is located in the Mt. Laurel Formation in the C&D Canal East Watershed in the Town of Middletown-Odessa, New Castle County, Delaware.

17. *Skytop Lodge Corporation D–2006–13–1.* An application for approval of an existing wastewater treatment plant located at Skytop Lodge. The existing WWTP is designed to discharge 0.075 mgd to the Brodhead Creek, which converges with the Delaware River at River Mile 213, within a reach classified as ''Outstanding Basin Waters.'' The facility is located in Barrett Township, Monroe County, Pennsylvania.

18. *Blue Ridge Country Club D–2006–18–1.* An application for approval of a ground and surface water withdrawal project to supply up to 10.59 mg/30 days of water to the applicant's golf course irrigation system from existing Wells Nos. 1, 2, 4 and 5 and a constructed pond. The project is located in the Walcksville Member of the Catskill Formation in the Fireline Creek Watershed in Lower Towamensing Township, Carbon County, Pennsylvania.

19. *Coolbaugh Township D–2006–23 CP–1.* An application for approval to upgrade and rerate an existing WWTP to add advanced secondary treatment and allow an increase from 0.049 mgd to 0.052 mgd. The plant discharges to the Tobyhanna Creek in the Lehigh River Watershed. The project is located in the drainage area of the Lower Delaware River Management Plan in Coolbaugh Township, Monroe County, Pennsylvania. The WWTP will continue to serve a portion of Coolbaugh Township only and will discharge through the existing outfall, which is upstream from F.E. Walter Dam and Pocono Lake.

In addition to the public hearing on the dockets listed above, the Commission's 1:30 p.m. business meeting will include a public hearing on a proposed resolution to ratify a Decree Party agreement for banking the 2006–2007 excess release quantity. The Commission also will consider action on: A resolution authorizing the Executive Director to enter into a contract for analysis of benthic macroinvertebrate samples from the Delaware River utilizing Clean Water Act Section 106 funds; a resolution authorizing the Executive Director to accept funds from the Federal Emergency Management Agency for the development of multi-jurisdictional flood mitigation plans in four New Jersey counties; a resolution to approve a DRBC records retention schedule; and a resolution authorizing the Executive Director to enter into a contract for landscape architectural services to develop the Ruth Patrick River Garden, utilizing funds provided by the William Penn Foundation.

The meeting will also include: adoption of the Minutes of the Commission's May 10, 2006 business meeting; announcements; a report on basin hydrologic conditions; a report by the Executive Director; a report by the Commission's General Counsel; and an opportunity for public dialogue.

In addition, supplemental notice is hereby provided for Docket No. D–2002–34 CP, issued on September 3, 2003, by which the Commission approved a ground water allocation for the New Castle County distribution system of the Artesian Water Company, Inc. (''Artesian''). The docket was reissued on May 18, 2005 as Docket D–2002–34 CP–2 to accommodate a modification unrelated to this supplemental notice. Both the 2003 and 2005 dockets provided for multiple ground water withdrawals from approximately 40 wells in the more than one dozen wellfields comprising Artesian's New Castle County

distribution system. The purpose of this supplemental notice is to highlight the inclusion in Docket D–2002–34 CP and continuation in Docket D–2002–34 CP–2 of New Well No. 4 to supply up to 6.48 million gallons per 30 days (mg/30 days) of water to the applicant's Artisan's Village public water supply distribution system. The addition of New Well No. 4 entailed no increase in the maximum combined withdrawal from the Artisan's Village wellfield, which remained unchanged by Docket D–2002–34 CP, at 90.72 mg/30 days. Although a notice of application received (NAR) was published for the proposed new well on September 11, 2002, the public notice issued in advance of the September 3, 2003 hearing did not highlight approval of the well. The modified docket issued by the Commission to Artesian Water Company in 2005 included no change associated with the Artisan's Village distribution system. Any person seeking a hearing to review the Commission's action in approving New Well No. 4 in the Artisan's Village wellfield may request a hearing in accordance with Article 6 of the Commission's *Rules of Practice and Procedure,* provided that such a request is received by the Commission within 30 days of the date this notice appears in either the **Federal Register** or the *Pennsylvania Code and Bulletin,* whichever date is later.

Draft dockets, the resolutions scheduled for public hearing on July 19, 2006, and the dockets associated with the supplemental notice provided above will be posted on the Commission's Web site, *http://www.drbc.net,* where they can be accessed through the Notice of Commission Meeting and Public Hearing. Additional documents relating to the dockets and other items may be examined at the Commission's offices. Please contact William Muszynski at 609–883–9500, extension 221, with any docket-related questions.

Individuals in need of an accommodation as provided for in the Americans with Disabilities Act who wish to attend the informational meeting, conference session or hearings should contact the commission secretary directly at 609–883–9500 ext. 203 or through the Telecommunications Relay Services (TRS) at 711, to discuss how the Commission can accommodate your needs.

Dated: June 21, 2006.

Pamela M. Bush,

Commission Secretary.

[FR Doc. E6–10226 Filed 6–28–06; 8:45 am]

BILLING CODE 6360–01–P

DEPARTMENT OF ENERGY

Federal Energy Regulatory Commission

[Docket No. RP06–393–000]

National Fuel Gas Supply Corporation; Notice of Service Agreements

June 20, 2006.

Take notice that on June 14, 2006, National Fuel Gas Supply Corporation (National Fuel) tendered for filing six FT Service Agreements between National Fuel and Beacon Landfill Gas Holdings, LLC (Beacon); two interconnection agreements between National Fuel and Beacon, and a Consent to Assignment and Agreement by and among National Fuel, Beacon and JPMorgan Chase Bank, N.A. as Trustee.

National Fuel requests that the Service Agreements, the interconnection agreements and the Consent to Assignment and Agreement be accepted for filing as material deviations and that the associated tariff sheet become effective on June 26, 2006.

National Fuel states that copies of this filing were served upon its customers and interested state commissions.

Any person desiring to intervene or to protest this filing must file in accordance with Rules 211 and 214 of the Commission's Rules of Practice and Procedure (18 CFR 385.211 and 385.214). Protests will be considered by the Commission in determining the appropriate action to be taken, but will not serve to make protestants parties to the proceeding. Any person wishing to become a party must file a notice of intervention or motion to intervene, as appropriate. Such notices, motions, or protests must be filed on or before the date as indicated below. Anyone filing an intervention or protest must serve a copy of that document on the Applicant. Anyone filing an intervention or protest on or before the intervention or protest date need not serve motions to intervene or protests on persons other than the Applicant.

The Commission encourages electronic submission of protests and interventions in lieu of paper using the ''eFiling'' link at *http://www.ferc.gov*. Persons unable to file electronically should submit an original and 14 copies of the protest or intervention to the Federal Energy Regulatory Commission, 888 First Street, NE., Washington, DC 20426.

This filing is accessible online at *http://www.ferc.gov*, using the ''eLibrary'' link and is available for review in the Commission's Public Reference Room in Washington, DC. There is an ''eSubscription'' link on the Web site that enables subscribers to receive e-mail notification when a document is added to a subscribed docket(s). For assistance with any FERC Online service, please e-mail *FERCOnlineSupport@ferc.gov*, or call (866) 208–3676 (toll free). For TTY, call (202) 502–8659.

Comment Date: 5 p.m. Eastern Time on June 27, 2006.

Magalie R. Salas,

Secretary.

[FR Doc. E6–10154 Filed 6–27–06; 8:45 am]

BILLING CODE 6717–01–P

DEPARTMENT OF ENERGY

Federal Energy Regulatory Commission

Combined Notice of Filings #1

June 19, 2006.

Take notice that the Commission received the following electric corporate filings:

Docket Numbers: EC06–130–000.

Applicants: Alcoa Inc.; Alcoa Power Generating Inc.; Alcoa Power Marketing, Inc.

Description: Application of Alcoa, Inc., Alcoa Power Generating, Inc. and Alcoa Power Marketing, Inc. for approval of corporate reorganization under section 203 of the Federal Power Act.

Filed Date: June 14, 2006.

Accession Number: 20060616–0190.

Comment Date: 5 p.m. Eastern Time on Wednesday, July 5, 2006.

Take notice that the Commission received the following exempt wholesale generator filings:

Docket Numbers: EG06–51–001.

Applicants: SAF Hydroelectric LLC.

Description: SAF Hydroelectric LLC submits the Notice of Self-Certification demonstrating that it is an Exempt Wholesale Generator.

Filed Date: June 12, 2006.

Accession Number: 20060616–0189.

Comment Date: 5 p.m. Eastern Time on Monday, July 3, 2006.

Take notice that the Commission received the following electric rate filings:

Docket Numbers: ER02–2551–003.

Applicants: Cargill Power Markets, LLC.

Description: Cargill Power Markets, LLC submits additional information about the construction commencement dates of a number of the generating facilities in which they own interest.

Filed Date: June 9, 2006.

Accession Number: 20060616–0179.

Comment Date: 5 p.m. Eastern Time on Thursday, June 29, 2006.

Docket Numbers: ER06–321–004.

Applicants: Midwest Independent Transmission System Operator, Inc.

Description: Midwest ISO submits a motion for leave to file compliance filing one day out of time and compliance filing on the Agreement.

Filed Date: June 13, 2006.

Accession Number: 20060615–0123.

Comment Date: 5 p.m. Eastern Time on Wednesday, July 5, 2006.

Docket Numbers: ER06–690–003.

Applicants: Midwest Independent Transmission System Operator, Inc.

Description: Midwest ISO submits compliance filing to revise Attachment HH (Dispute Resolution Procedures) of the Open Access Transmission & Energy Markets Tariff.

Filed Date: June 14, 2006.

Accession Number: 20060616–0181.

Comment Date: 5 p.m. Eastern Time on Wednesday, July 5, 2006.

Docket Numbers: ER06–785–001.

Applicants: Midwest Independent Transmission System Operator, Inc.

Description: Midwest Independent Transmission and Midwest ISO Transmission Owners submit its supplemental filing in response to FERC's request for additional information.

Filed Date: June 14, 2006.

Accession Number: 20060616–0182.

Comment Date: 5 p.m. Eastern Time on Wednesday, July 5, 2006.

Docket Numbers: ER06–788–001.

Applicants: Southern California Edison Company.

Description: Southern California Edison Co. submits additional information requested by FERC's May 26, 2006 letter order.

Filed Date: June 15, 2006.

Accession Number: 20060616–0051.

Comment Date: 5 p.m. Eastern Time on Thursday, July 6, 2006.

Docket Numbers: ER06–931–001; ER06–932–001.

Applicants: Black River Macro Discretionary Fund Ltd.; Black River Commodity Energy Fund LLC.

Description: Black River Commodity Energy Fund, LLC and Black River Macro Discretionary Fund Ltd. submit additional information concerning its lack of generation market power to its application filed on May 3, 2006.

Filed Date: June 9, 2006.

Accession Number: 20060616–0186.

Comment Date: 5 p.m. Eastern Time on Thursday, June 29, 2006.

Docket Numbers: ER06–955–001; ER06–956–001; ER06–957–001; ER06–1019–001; ER06–1020–001; ER06–1021–001; ER06–1022–001; ER06–1052–001; ER06–1053–001.

Applicants: American Transmission Company LLC.

Description: American Transmission Co., LLC's response to an informal request for information by FERC Staff regarding the filing of its nine Distribution Transmission Interconnection Agreements.

Filed Date: June 12, 2006.

Accession Number: 20060616–0297.

Comment Date: 5 p.m. Eastern Time on Monday, July 3, 2006.

Docket Numbers: ER06–1127–000.

Applicants: PJM Interconnection, LLC.

Description: PJM Interconnection, LLC submits a transmission service agreement with First Energy Solutions Corp for firm point to point transmission service.

Filed Date: June 14, 2006.

Accession Number: 20060615–0150.

Comment Date: 5 p.m. Eastern Time on Wednesday, July 5, 2006.

Docket Numbers: ER06–1129–000.

Applicants: Western Electricity Coordinating Council.

Description: Western Electricity Coordinating Council submits amended version of FERC Rate Schedule No. 1 reflecting changes to the WECC bylaws.

Filed Date: June 14, 2006.

Accession Number: 20060615–0151.

Comment Date: 5 p.m. Eastern Time on Wednesday, July 5, 2006.

Docket Numbers: ER06–1130–000.

Applicants: American Electric Power System Corporation.

Description: American Electric Power Service Corp. on behalf of its AEP Texas Central Co. submits a fully executed interconnection agreement with Valero Refining-Texas, LP.

Filed Date: June 13, 2006.

Accession Number: 20060615–0126.

Comment Date: 5 p.m. Eastern Time on Wednesday, July 5, 2006.

Docket Numbers: ER06–1131–000.

Applicants: LSP-Kendall Energy, LLC.

Description: LSP-Kendall Energy, LLC submits a rate schedule under which it specifies its revenue requirement for providing Reactive Support and Voltage Control from Generation Sources.

Filed Date: June 13, 2006.

Accession Number: 20060615–0125.

Comment Date: 5 p.m. Eastern Time on Wednesday, July 5, 2006.

Docket Numbers: ER06–1133–000.

Applicants: Central Hudson Gas & Electric Corporation.

Description: CH Energy Group Inc. submits a Notice of Cancellation of its Rate Schedule FERC No. 73, effective June 10, 2006.

Filed Date: June 14, 2006.

Accession Number: 20060616–0188.

Comment Date: 5 p.m. Eastern Time on Wednesday, July 5, 2006.

Docket Numbers: ER06–1134–000.

Applicants: Central Vermont Public Service Corporation.

Description: Central Vermont Public Service Corp submits notice of cancellation of Tariff No. 4 and the Tariff No. 1 Service Agreement terminating its FPC Electric Tariff, First Revised Volume No. 1.

Filed Date: June 14, 2006.

Accession Number: 20060616–0187.

Comment Date: 5 p.m. Eastern Time on Wednesday, July 5, 2006.

Docket Numbers: ER06–1135–000.

Applicants: EPCOR Energy Marketing (US) Inc.

Description: EPCOR Energy Marketing, Inc. submits application for Market-Based Rate Authority and for certain waivers and blanket approvals.

Filed Date: June 14, 2006.

Accession Number: 20060616–0185.

Comment Date: 5 p.m. Eastern Time on Wednesday, July 5, 2006.

Docket Numbers: ER06–1136–000.

Applicants: PJM Interconnection, L.L.C.

Description: PJM Interconnection, L.L.C. submits revisions to Schedule No. 2 of the PJM OATT to reflect the reallocation of Allegheny Energy Supply Co., L.L.C. *et al.* reactive power.

Filed Date: June 14, 2006.

Accession Number: 20060616–0184.

Comment Date: 5 p.m. Eastern Time on Wednesday, July 5, 2006.

Docket Numbers: ER06–1137–000.

Applicants: Tampa Electric Company.

Description: Tampa Electric Co. submits First Revised Sheet No. 41 and No. 50 to FERC Electric Tariff, First Revised Volume No 5, to be effective June 15, 2006.

Filed Date: June 14, 2006.

Accession Number: 20060616–0052.

Comment Date: 5 p.m. Eastern Time on Wednesday, July 5, 2006.

Take notice that the Commission received the following electric securities filings:

Docket Numbers: ES06–35–000; EC06–110–000.

Applicants: Entergy Services Inc.

Description: Entergy Services submits on behalf of its associate companies—Supplemental Information on Exhibit B to the Joint Application and request authorization for each application to issue and sell equity and long-term and short-term debt securities.

Filed Date: June 13, 2006.

Accession Number: 20060613–5037.

Comment Date: 5 p.m. Eastern Time on Wednesday, July 5, 2006.

Take notice that the Commission received the following public utility holding company filings:

Docket Numbers: PH06–77–000.

Applicants: Enbridge Gas Distribution Inc.

Description: Enbridge Gas Distribution Inc. submits its notification of exemption on Form FERC–65A.

Filed Date: June 14, 2006.

Accession Number: 20060615–0336.

Comment Date: 5 p.m. Eastern Time on Wednesday, July 5, 2006.

Any person desiring to intervene or to protest in any of the above proceedings must file in accordance with Rules 211 and 214 of the Commission's Rules of Practice and Procedure (18 CFR 385.211 and 385.214) on or before 5 p.m. Eastern time on the specified comment date. It is not necessary to separately intervene again in a subdocket related to a compliance filing if you have previously intervened in the same docket. Protests will be considered by the Commission in determining the appropriate action to be taken, but will not serve to make protestants parties to the proceeding. Anyone filing a motion to intervene or protest must serve a copy of that document on the Applicant. In reference to filings initiating a new proceeding, interventions or protests submitted on or before the comment deadline need not be served on persons other than the Applicant.

The Commission encourages electronic submission of protests and interventions in lieu of paper, using the FERC Online links at *http://www.ferc.gov*. To facilitate electronic service, persons with Internet access who will eFile a document and/or be listed as a contact for an intervenor must create and validate an eRegistration account using the eRegistration link. Select the eFiling link to log on and submit the intervention or protests.

Persons unable to file electronically should submit an original and 14 copies of the intervention or protest to the Federal Energy Regulatory Commission, 888 First St., NE., Washington, DC 20426.

The filings in the above proceedings are accessible in the Commission's eLibrary system by clicking on the appropriate link in the above list. They are also available for review in the Commission's Public Reference Room in Washington, DC. There is an eSubscription link on the Web site that enables subscribers to receive e-mail notification when a document is added to a subscribed dockets(s). For assistance with any FERC Online service, please e-mail *FERCOnlineSupport@ferc.gov*. or call (866) 208–3676 (toll free). For TTY, call (202) 502–8659.

Magalie R. Salas,

Secretary.

[FR Doc. E6–10129 Filed 6–27–06; 8:45 am]

BILLING CODE 6717–01–P

DEPARTMENT OF ENERGY

Federal Energy Regulatory Commission

[Project No. 2144–035-Washington]

City of Seattle, Washington; Notice of Scoping Meetings and Site Visits

June 19, 2006.

a. *Type of Filings:* Notice of Intent to File License Applications for New License and Pre-Application Document.

b. *Project Nos.:* 2144–035.

c. *Dated Filed:* May 5, 2006.

d. *Submitted By:* Seattle City Light (SCL).

e. *Name of Project:* Boundary Hydroelectric Project No. 2144.

f. *Locations:* The Boundary Hydroelectric Project is located on Pend Oreille River about 10 miles north of Metaline Falls in Pend Oreille County, Washington. The Tacoma Project occupies lands of the Colville National Forest and lands managed by the U.S. Bureau of Land Management.

g. *Filed Pursuant to:* 18 CFR part 5 of the Commission's Regulations.

h. *Applicant Contact:* Barbara Greene, SCL Boundary Relicensing Program Lead, Seattle City Light, P.O. Box 34023, Seattle, Washington 98124–4023; (206) 615–1091.

i. *FERC Contact:* David Turner (202) 502–6091 or via e-mail at *david.turner@ferc.gov*.

j. SCL filed a Pre-Application Document (PAD) for the Boundary Project, including proposed process plans and schedules, with the Commission pursuant to 18 CFR 5.6 of the Commission's regulations.

k. Copies of the PAD and Scoping Document 1 (SD1) are available for review at the Commission in the Public Reference Room or may be viewed on the Commission's Web site (*http://www.ferc.gov*), using the ''eLibrary'' link. Enter the docket number, excluding the last three digits, in the docket number field to access the document. For assistance, contact FERC Online Support at *FERCONlineSupport@ferc.gov* or toll free at 1–866–208–3676, or for TTY, (202) 502–8659. A copy is also available for inspection and reproduction at the address in paragraph h.

Register online at *http://ferc.gov/esubscribenow.htm* to be notified via e-mail of new filings and issuances related to these or other pending projects. For assistance, contact FERC Online Support.

l. With this notice, we are notifying interested parties of the scoping meetings and site visit and soliciting comments on SD1. A future notice will be issued soliciting comments on the PAD and study requests (see paragraph n below). All comments on SD1 should be sent to the address above in paragraph h. In addition, all comments and all communications to Commission staff related to the merits of the potential application (original and eight copies) must be filed with the Commission at the following address: Magalie R. Salas, Secretary, Federal Energy Regulatory Commission, 888 First Street, NE., Washington, DC 20426. All filings with the Commission relevant to the Boundary Hydroelectric Project must include on the first page, the project name, (Boundary Hydroelectric Project) and number (P–2144–035), and bear the heading, as appropriate, ''Comments on Scoping Document 1.'' Any individual or entity interested in commenting on SD1 must do so by September 1, 2006.

Comments on SD1 and other permissible forms of communications with the Commission may be filed electronically via the Internet in lieu of paper. The Commission strongly encourages electronic filings. See 18 CFR 385.2001(a)(1)(iii) and the instructions on the Commission's Web site (*http://www.ferc.gov*) under the ''e-filing'' link.

m. Although our current intent is to prepare a draft and final environmental assessment (EA), there is a possibility that an Environmental Impact Statement (EIS) will be required. Nevertheless, this meeting will satisfy the NEPA scoping requirements, irrespective of whether an EA or EIS is issued by the Commission.

Scoping Meetings

We will hold two scoping meetings for the project at the times and places noted below. The daytime meetings will focus on resource agency, Indian tribes, and non-governmental organization concerns, while the evening meetings are primarily for receiving input from the public. We invite all interested individuals, organizations, Indian tribes, and agencies to attend one or all of the meetings, and to assist staff in identifying particular study needs, as well as the scope of environmental issues to be addressed in the environmental document. The times and locations of these meetings are as follows:

Daytime Scoping Meeting

Date and Time: July 18, 2006, 7 p.m. to 9 p.m (PST)

Location: Quality Inn Oakwood (Room is Cascade C), 7919 North Division Street, Spokane, Washington, 99208.

Nighttime Scoping Meeting

Date and Time: July 19, 2006, from 7 a.m. to 9 p.m. (MST).

Location: Cutter Theater, 302 Park Street, Metaline Falls, Washington, 99153.

For Directions: Contact Barbara Greene at (206) 615–1091.

SD1, which outlines the subject areas to be addressed in the environmental document, has been mailed to the individuals and entities on the Commission's mailing list. Copies of SD1 will be available at the scoping meetings, or may be viewed on the Web at *http://www.ferc.gov*, using the ''eLibrary'' link. Follow the directions for accessing information in paragraph k. Depending on the extent of comments received, a Scoping Document 2 (SD2) may or may not be issued.

Site Visits

SCL will conduct a site visit of the project on Wednesday, July 19, 2006 at 1:00. All participants should meet at SCL's Boundary Dam forebay recreation site parking lot at 12:30. All participants are responsible for their own transportation. Those interested in participating in site visit must notify Mary Pat DiLeva of their intent at *marypat.dileva@seattle.gov* by June 30, 2006. Anyone with questions about the site visits (or for directions) should contact Mary Pat DiLeva.

Scoping Meeting Objectives

At the scoping meetings, staff will: (1) Present the proposed list of issues to be addressed in the EA; (2) review and discuss existing conditions and resource agency management objectives; (3) review and discuss existing information and identify preliminary information and study needs; (4) review and discuss the process plan and schedule for pre-filing activity that incorporates the time frames provided for in Part 5 of the Commission's regulations and, to the extent possible, maximizes coordination of Federal, state, and tribal permitting and certification processes; and (5) discuss requests by any Federal or state agency or Indian tribe acting as a cooperating agency for development of an environmental document.

Meeting participants should come prepared to discuss their issues and/or concerns. Please review the Pre-Application Document in preparation for the scoping meetings. Directions on how to obtain a copy of the PAD and SD1 are included in item k of this notice.

Scoping Meeting Procedures

The scoping meetings will be recorded by a stenographer and will become part of the formal Commission records for the projects.

n. A separate notice solicitating comments on the PAD and study requests will be issued by July 5, 2006. That notice will set the date for filing comments on the PAD and study requests (September 1, 2006) in accordance with Commission regulations and the proposed process plan.

Magalie R. Salas,

Secretary.

[FR Doc. E6–10125 Filed 6–27–06; 8:45 am]

BILLING CODE 6717–01–P

DEPARTMENT OF ENERGY

Federal Energy Regulatory Commission

Notice of Application for Non-Project Use of Project Lands and Waters and Soliciting Comments, Motions To Intervene, and Protests

June 19, 2006.

Take notice that the following hydroelectric application has been filed with the Commission and is available for public inspection.

a. *Type of Application:* Non-Project Use of Project Lands and Waters.

b. *Project No.:* 271–094.

c. *Date filed:* May 26, 2006.

d. *Applicant:* Entergy Arkansas, Inc.

e. *Name of Project:* Carpenter & Remmel Dams.

f. *Location:* Lake Hamilton on the Quachita River, Garland and Hot Springs Counties, Arkansas.

g. *Filed Pursuant to:* Federal Power Act, 16 U.S.C. 791(a)–825(r).

h. *Applicant Contact:* Mr. W. Henry Jones, Manager Hydro Operations, Entergy Fossil Operations, Lake Catherine/Hydro/Lynch, 141 West County Line Road, Malvern, AR 72104, Telephone (501) 844–2148.

i. *FERC Contact:* John K. Novak, Telephone (202) 502–6076, e-mail *john.novak@ferc.gov.*

j. *Deadline for filing comments and or motions:* July 17, 2006.

k. *Description of Proposal:* Entergy, Arkansas, Inc. is requesting Commission approval to authorize the City of Hot Springs (City) to increase its water withdrawal to 30 million gallons per day (MGD) from Lake Hamilton for municipal use. Currently the City is authorized to withdraw 20 MGD from Lake Hamilton. Under the current proposal the City would be allowed to withdraw up to 30 MGD in a single day, not to exceed an average of 20 MGD within a rolling 3-month period. This proposal would require no new construction or alteration of the existing water withdrawal facilities.

l. *Locations of the Application:* A copy of the application is available for inspection and reproduction at the Commission's Public Reference Room, located at 888 First Street, NE., Room 2A, Washington, DC 20426, or by calling (202) 502–8371. This filing may also be viewed on the Commission's Web site at *http://www.ferc.gov* using the ''eLibrary'' link. Enter the docket number excluding the last three digits in the docket number field (p-271) to access the document. You may also register online at *http://ferc.gov/docs-filing/esubscription.asp* to be notified via e-mail of new filings and issuances related to this or other pending projects. For assistance, call 1–866–208–3676 or e-mail *FERCOnlineSupport@ferc.gov;* for TTY, call (202) 502–8659. A copy is also available for inspection and reproduction at the address in item (h) above.

m. Individuals desiring to be included on the Commission's mailing list should so indicate by writing to the Secretary of the Commission.

n. *Comments, Protest, or Motions to Intervene:* Anyone may submit comments, a protest, or a motion to intervene in accordance with the requirements of Rules of Practice and Procedure, 18 CFR 385.210, .211, and .214. In determining the appropriate action to take, the Commission will consider all protests or other comments filed, but only those who file a motion to intervene in accordance with the Commission's Rules may become a party to the proceeding. Any comments, protests, or motions to intervene must be received on or before the specified comment date for the particular application.

o. *Filing and Service of Responsive Documents:* Any filings must bear in capital letters the title ''COMMENTS'', RECOMMENDATIONS FOR TERMS AND CONDITIONS'', ''PROTEST'', or ''MOTION TO INTERVENE'', as applicable, and the Project Number of the particular application to which the filing refers (P–271–094). All documents (original and eight copies) should be filed with: Magalie R. Salas, Secretary, Federal Energy Regulatory Commission, 888 First Street, NE., Washington, DC 20426. A copy of any motion to intervene must also be served upon each

representative of the Applicant specified in the particular application.

p. *Agency Comments:* Federal, state, and local agencies are invited to file comments on the described application. A copy of the application may be obtained by agencies directly from the Applicant. If an agency does not file comments within the time specified for filing comments, it will be presumed to have no comments. One copy of an agency's comments must also be sent to the Applicant's representatives.

q. Comments, protests and interventions may be filed electronically via the Internet in lieu of paper. See, 18 CFR 385.2001(a)(1)(iii) and the instructions on the Commission's Web site at *http://www.ferc.gov* under the ''e-Filing'' link.

Magalie R. Salas,

Secretary.

[FR Doc. E6–10126 Filed 6–27–06; 8:45 am]

BILLING CODE 6717–01–P

DEPARTMENT OF ENERGY

Federal Energy Regulatory Commission

Notice of Application for Amendment of License and Soliciting Comments, Motions To Intervene, and Protests

June 22, 2006.

Take notice that the following application has been filed with the Commission and is available for public inspection:

a. *Application Type:* Non-Capacity Amendment of License.

b. *Project No:* 400–044.

c. *Date Filed:* May 9, 2006.

d. *Applicant:* Public Service Company of Colorado.

e. *Name of Project:* Tacoma-Ames Hydroelectric Project.

f. *Location:* The Tacoma Hydroelectric Project is located on Cascade Creek, Little Cascade Creek, Elbert Creek, and the Animas River in La Plata and San Juan Counties, Colorado. The Tacoma Project occupies lands of the San Juan National Forest.

The Ames Hydroelectric Project is located on the Lake Fork, Howard Fork, and the South Fork of the San Miguel River, in San Miguel County, Colorado. The Ames Project occupies lands of the Uncompahgre National Forest.

g. *Filed Pursuant to:* Federal Power Act, 16 U.S.C. 791a–825r.

h. *Applicant Contact:* Alfred Hughes, Xcel Energy, 240 Electra Lake Road East, Durango, Colorado 81301 (970) 247–8363.

i. *FERC Contact:* Any questions on this notice should be addressed to Ms. Linda Stewart at (202) 502–6680, or e-mail address: *linda.stewart@ferc.gov*.

j. *Deadline for filing comments and or motions:* July 21, 2006.

k. *Description of Request:* The Public Service Company of Colorado proposes to replace and realign approximately 900 feet of existing penstock route at the Ames Project development. The penstock section to be replaced is elevated above ground level on a steep slope below State Highway 145 and is difficult to maintain in its current location. The new alignment would increase overall penstock stability and limit the potential for future damage.

l. *Locations of the Application:* A copy of the application is available for inspection and reproduction at the Commission's Public Reference Room, located at 888 First Street, NE., Room 2A, Washington, DC 20426, or by calling (202) 502–8371. Information about this filing may also be viewed on the Commission's Web site at *http://www.ferc.gov* using the ''eLibrary'' link. Enter the docket number excluding the last three digits in the docket number field to access the document. You may also register online at *http://www.ferc.gov/docs-filing/esubscription.asp* to be notified via e-mail of new filings and issuances related to this or other pending projects. For assistance, call 1–866–208–3676 or e-mail *FERCOnlineSupport@ferc.gov*, for TTY, call (202) 502–8659. A copy is also available for inspection and reproduction at the address in item (h) above.

m. Individuals desiring to be included on the Commission's mailing list should so indicate by writing to the Secretary of the Commission.

n. *Comments, Protests, or Motions to Intervene:* Anyone may submit comments, a protest, or a motion to intervene in accordance with the requirements of Rules of Practice and Procedure, 18 CFR 385.210, .211, .214. In determining the appropriate action to take, the Commission will consider all protests or other comments filed, but only those who file a motion to intervene in accordance with the Commission's Rules may become a party to the proceeding. Any comments, protests, or motions to intervene must be received on or before the specified comment date for the particular application.

o. *Filing and Service of Responsive Documents:* Any filings must bear in all capital letters the title ''COMMENTS'', ''RECOMMENDATIONS FOR TERMS AND CONDITIONS'', ''PROTEST'', or ''MOTION TO INTERVENE'', as applicable, and the Project Number of the particular application to which the filing refers. All documents (original and eight copies) should be filed with: Magalie R. Salas, Secretary, Federal Energy Regulatory Commission, 888 First Street, NE., Washington DC 20426. A copy of any motion to intervene must also be served upon each representative of the Applicant specified in the particular application.

p. *Agency Comments:* Federal, state, and local agencies are invited to file comments on the described application. A copy of the application may be obtained by agencies directly from the Applicant. If an agency does not file comments within the time specified for filing comments, it will be presumed to have no comments. One copy of an agency's comments must also be sent to the Applicant's representatives.

q. Comments, protests and interventions may be filed electronically via the Internet in lieu of paper. See, 18 CFR 385.2001(a)(1)(iii) and the instructions on the Commission's Web site at *http://www.ferc.gov* under the ''e-Filing'' link.

Magalie R. Salas,

Secretary.

[FR Doc. E6–10162 Filed 6–28–06; 8:45 am]

BILLING CODE 6717–01–P

DEPARTMENT OF ENERGY

Federal Energy Regulatory Commission

Notice of Application Accepted for Filing and Soliciting Comments, Protests, and Motions to Intervene

June 22, 2006.

Take notice that the following hydroelectric application has been filed with the Commission and is available for public inspection:

a. *Type of Application:* Preliminary Permit.

b. *Project No:* 12614–000.

c. *Date filed:* September 29, 2005.

d. *Applicant:* Alaska Power & Telephone Company.

e. *Name and Location of Project:* The proposed Ninemile Hydroelectric Project would be located on the Salmon River in the Prince of Wales-Outer Ketchikan Census Area in Ketchikan, Alaska. The project would occupy lands of the United States within the Tongass National Forest.

f. *Filed Pursuant to:* Federal Power Act, 16 U.S.C. 791(a)–825(r).

g. *Applicant Contact:* Robert S. Grimm, President, Alaska Power & Telephone Co., P.O. Box 3222, Port Townsend, WA 98368, (360) 385–1733 x120.

h. *FERC Contact:* Tom Papsidero, (202) 502–6002.

i. *Deadline for filing comments, protests, and motions to intervene:* 60 days from the issuance date of this notice.

All documents (original and eight copies) should be filed with Magalie R. Salas, Secretary, Federal Energy Regulatory Commission, 888 First Street, NE., Washington, DC 20426. Comments, protests and interventions may be filed electronically via the Internet in lieu of paper; see 18 CFR 385.2001(a)(1)(iii) and the instructions on the Commission's Web site under the ''e-Filing'' link. The Commission strongly encourages electronic filings. Please include the project number (P–12614–000) on any comments or motions filed.

The Commission's Rules of Practice and Procedure require all intervenors filing documents with the Commission to serve a copy of that document on each person in the official service list for the project. Further, if an intervenor files comments or documents with the Commission relating to the merits of an issue that may affect the responsibilities of a particular resource agency, they must also serve a copy of the document on that resource agency.

j. *Description of Existing Facilities and Proposed Project:* The proposed project would consist of: (1) A proposed concrete diversion and intake structure, (2) a proposed 650-foot-long, 144-inch-diameter steel penstock, (3) a proposed powerhouse containing two generator units with a total installed capacity of 10 megawatts, (4) a proposed 35 kV transmission line which would connect with an existing transmission line, and (5) appurtenant facilities. The project would have an annual generation of 40 GWh.

k. *Location of Applications:* A copy of the application is available for inspection and reproduction at the Commission in the Public Reference Room or may be viewed on the Commission's Web site at *http://www.ferc.gov* using the ''eLibrary'' link. Enter the docket number excluding the last three digits in the docket number field to access the document. For assistance, call toll-free 1–866–208–3676 or e-mail *FERCOnlineSupport@ferc.gov*. For TTY, call (202) 502–8659. A copy is also available for inspection and reproduction at the address in item g above.

l. Individuals desiring to be included on the Commission's mailing list should so indicate by writing to the Secretary of the Commission.

m. *Competing Preliminary Permit:* Anyone desiring to file a competing application for preliminary permit for a proposed project must submit the competing application itself, or a notice of intent to file such an application, to the Commission on or before the specified comment date for the particular application (see 18 CFR 4.36). Submission of a timely notice of intent allows an interested person to file the competing preliminary permit application no later than 30 days after the specified comment date for the particular application. A competing preliminary permit application must conform with 18 CFR 4.30(b) and 4.36.

n. *Competing Development Application:* Any qualified development applicant desiring to file a competing development application must submit to the Commission, on or before a specified comment date for the particular application, either a competing development application or a notice of intent to file such an application. Submission of a timely notice of intent to file a development application allows an interested person to file the competing application no later than 120 days after the specified comment date for the particular application. A competing license application must conform with 18 CFR 4.30(b) and 4.36.

o. *Notice of Intent:* A notice of intent must specify the exact name, business address, and telephone number of the prospective applicant, and must include an unequivocal statement of intent to submit, if such an application may be filed, either a preliminary permit application or a development application (specify which type of application). A notice of intent must be served on the applicant(s) named in this public notice.

p. *Proposed Scope of Studies under Permit:* A preliminary permit, if issued, does not authorize construction. The term of the proposed preliminary permit would be 36 months. The work proposed under the preliminary permit would include economic analysis, preparation of preliminary engineering plans, and a study of environmental impacts. Based on the results of these studies, the Applicant would decide whether to proceed with the preparation of a development application to construct and operate the project.

q. *Comments, Protests, or Motions to Intervene:* Anyone may submit comments, a protest, or a motion to intervene in accordance with the requirements of Rules of Practice and Procedure, 18 CFR 385.210, .211, .214. In determining the appropriate action to take, the Commission will consider all protests or other comments filed, but only those who file a motion to intervene in accordance with the Commission's Rules may become a party to the proceeding. Any comments, protests, or motions to intervene must be received on or before the specified comment date for the particular application.

Comments, protests and interventions may be filed electronically via the Internet in lieu of paper; see 18 CFR 385.2001 (a)(1)(iii) and the instructions on the Commission's Web site under ''e-filing'' link. The Commission strongly encourages electronic filing.

r. *Filing and Service of Responsive Documents:* Any filings must bear in all capital letters the title ''COMMENTS'', ''NOTICE OF INTENT TO FILE COMPETING APPLICATION'', ''COMPETING APPLICATION'', ''PROTEST'', or ''MOTION TO INTERVENE'', as applicable, and the Project Number of the particular application to which the filing refers. Any of the above-named documents must be filed by providing the original and the number of copies provided by the Commission's regulations to: The Secretary, Federal Energy Regulatory Commission, 888 First Street, NE., Washington, DC 20426. An additional copy must be sent to Director, Division of Hydropower Administration and Compliance, Federal Energy Regulatory Commission, at the above-mentioned address. A copy of any notice of intent, competing application or motion to intervene must also be served upon each representative of the Applicant specified in the particular application.

s. *Agency Comments:* Federal, state, and local agencies are invited to file comments on the described application. A copy of the application may be obtained by agencies directly from the Applicant. If an agency does not file comments within the time specified for filing comments, it will be presumed to have no comments. One copy of an agency's comments must also be sent to the Applicant's representatives.

Magalie R. Salas,

Secretary.

[FR Doc. E6–10164 Filed 6–27–06; 8:45 am]

BILLING CODE 6717–01–P

DEPARTMENT OF ENERGY

Federal Energy Regulatory Commission

Notice of Application Accepted for Filing and Soliciting Comments, Motions to Intervene, and Protests

June 22, 2006.

Take notice that the following hydroelectric application has been filed with the Commission and is available for public inspection:

a. *Type of Application:* Competing Preliminary Permit.

b. *Project No:* 12687–000.

c. *Date Filed:* June 14, 2006.

d. *Applicant:* Public Utility District No. 1 of Snohomish County, Washington.

e. *Name of Project:* Deception Pass Tidal Energy Project.

f. *Location:* The project would be located in Deception Pass, between Whidbey Island and Fidalgo Island, in the Puget Sound in Skagit and Island Counties, Washington.

g. *Filed Pursuant to:* Federal Power Act, 16 U.S.C. 791(a)–825(r).

h. *Applicant Contacts:* Mr. Steven Klein, General Manager, P.O. Box 1107, 2320 California Street, Everett, WA 98206, (425) 783–8473.

i. *FERC Contact:* Mr. Chris Yeakel, (202)–502–8132.

j. *Deadline for filing motions to intervene, protests and comments:* 30 days from the issuance date of this notice.

All documents (original and eight copies) should be filed with: Magalie R. Salas, Secretary, Federal Energy Regulatory Commission, 888 First Street, NE., Washington, DC 20426. Comments, protests, and interventions may be filed electronically via the Internet in lieu of paper; see 18 CFR 385.2001(a)(1)(iii) and the instructions on the Commission's Web site under the ''e-Filing'' link. The Commission strongly encourages electronic filings. Please include the project number (P–12687–000) on any comments or motions filed.

The Commission's Rules of Practice and Procedure require all intervenors filing documents with the Commission to serve a copy of that document on each person in the official service list for the project. Further, if an intervenor files comments or documents with the Commission relating to the merits of an issue that may affect the responsibilities of a particular resource agency, they must also serve a copy of the document on that resource agency.

k. *Competing Application:* Project No. 12663–000, Date Filed: March 31, 2006, Notice Issued: May 2, 2006, Due Date: July 3, 2006.

l. *Description of Project:* The proposed project would consist of: (1) Four Tidal In Stream Energy Conversion (TISEC) devices consisting of, (2) rotating propeller blades 20 meters in diameter, (3) integrated generators, (4) anchoring systems, (5) mooring lines, and (6) interconnection transmission lines. The project is estimated to have a minimum annual generation of 20.7 gigawatt-hours per-year, which would be distributed by the Snohomish County Public Utility District.

m. *Locations of Applications:* A copy of the application is available for inspection and reproduction at the Commission in the Public Reference Room, located at 888 First Street NE., Room 2A, Washington, DC 20426, or by calling (202) 502–8371. This filing may also be viewed on the Commission's Web site at *http://www.ferc.gov* using the ''eLibrary'' link. Enter the docket number excluding the last three digits in the docket number field to access the document. For assistance, call toll-free 1–866–208–3676 or e-mail *FERCOnlineSupport@ferc.gov*. For TTY, call (202) 502–8659. A copy is also available for inspection and reproduction at the address in item h above.

n. Individuals desiring to be included on the Commission's mailing list should so indicate by writing to the Secretary of the Commission.

o. *Proposed Scope of Studies under Permit:* A preliminary permit, if issued, does not authorize construction. The term of the proposed preliminary permit would be 36 months. The work proposed under the preliminary permit would include economic analysis, preparation of preliminary engineering plans, and a study of environmental impacts. Based on the results of these studies, the Applicant would decide whether to proceed with the preparation of a development application to construct and operate the project.

p. *Comments, Protests, or Motions to Intervene:* Anyone may submit comments, a protest, or a motion to intervene in accordance with the requirements of Rules of Practice and Procedure, 18 CFR 385.210, .211, .214. In determining the appropriate action to take, the Commission will consider all protests or other comments filed, but only those who file a motion to intervene in accordance with the Commission's Rules may become a party to the proceeding. Any comments, protests, or motions to intervene must be received on or before the specified comment date for the particular application.

q. *Filing and Service of Responsive Documents:* Any filings must bear in all capital letters the title ''COMMENTS'', ''PROTEST'', or ''MOTION TO INTERVENE'', as applicable, and the Project Number of the particular application to which the filing refers. Any of the above-named documents must be filed by providing the original and the number of copies provided by the Commission's regulations to: The Secretary, Federal Energy Regulatory Commission, 888 First Street, NE., Washington, DC 20426. An additional copy must be sent to Director, Division of Hydropower Administration and Compliance, Federal Energy Regulatory Commission, at the above-mentioned address. A copy of any motion to intervene must also be served upon each representative of the Applicant specified in the particular application.

Comments, protests and interventions may be filed electronically via the Internet in lieu of paper; see 18 CFR 385.2001(a)(1)(iii) and the instructions on the Commission's Web site under the ''e-Filing'' link. The Commission strongly encourages electronic filings

r. *Agency Comments:* Federal, state, and local agencies are invited to file comments on the described application. A copy of the application may be obtained by agencies directly from the Applicant. If an agency does not file comments within the time specified for filing comments, it will be presumed to have no comments. One copy of an agency's comments must also be sent to the Applicant's representatives.

Magalie R. Salas,

Secretary.

[FR Doc. E6–10165 Filed 6–27–06; 8:45 am]

BILLING CODE 6717–01–P

DEPARTMENT OF ENERGY

Federal Energy Regulatory Commission

Notice of Application Accepted for Filing and Soliciting Motions To Intervene, Protests, and Comments

June 22, 2006.

Take notice that the following hydroelectric application has been filed with the Commission and is available for public inspection:

a. *Type of Application:* Preliminary Permit.

b. *Project No:* 12688–000.

c. *Date filed:* June 15, 2006.

d. *Applicant:* Public Utility District No. 1 of Snohomish County, Washington.

e. *Name of Project:* Rich Passage Tidal Energy Project.

f. *Location:* The project would be located in Rich Passage in Puget Sound, Kitsap County, between the southern end of Bainbridge Island and the mainland of the State of Washington.

g. *Filed Pursuant to:* Federal Power Act, 16 U.S.C. 791(a)–825(r).

h. *Applicant Contacts:* Mr. Steven Klein, General Manager, P.O. Box 1107, 2320 California Street, Everett, WA 98206, (425) 783–8473.

i. *FERC Contact:* Chris Yeakel, (202) 502–8132.

j. *Deadline for filing comments, protests, and motions to intervene:* 60 days from the issuance date of this notice.

The Commission's Rules of Practice and Procedure require all intervenors filing documents with the Commission to serve a copy of that document on each person in the official service list for the project. Further, if an intervenor files comments or documents with the Commission relating to the merits of an issue that may affect the responsibilities of a particular resource agency, they must also serve a copy of the document on that resource agency.

k. *Description of Project:* The proposed project would consist of: (1) 62 Tidal In Stream Energy Conversion (TISEC) devices consisting of, (2) rotating propeller blades 10 to 20 meters in diameter, (3) integrated generators with a capacity of 22 to 68 kW, (4) anchoring systems, (5) mooring lines, and (6) interconnection transmission lines. The project is estimated to have an annual generation of 8.56 gigawatt-hours per-year, which would be distributed by the Snohomish County Public Utility District.

l. *Locations of Applications:* A copy of the application is available for inspection and reproduction at the Commission in the Public Reference Room, located at 888 First Street, NE., Room 2A, Washington, DC 20426, or by calling (202) 502–8371. This filing may also be viewed on the Commission's Web site at *http://www.ferc.gov* using the ''eLibrary'' link. Enter the docket number excluding the last three digits in the docket number field to access the document. For assistance, call toll-free 1–866–208–3676 or e-mail *FERCOnlineSupport@ferc.gov.* For TTY, call (202) 502–8659. A copy is also available for inspection and reproduction at the address in item h above.

m. Individuals desiring to be included on the Commission's mailing list should so indicate by writing to the Secretary of the Commission.

n. *Competing Preliminary Permit:* Anyone desiring to file a competing application for preliminary permit for a proposed project must submit the competing application itself, or a notice of intent to file such an application, to the Commission on or before the specified comment date for the particular application (see 18 CFR 4.36). Submission of a timely notice of intent allows an interested person to file the competing preliminary permit application no later than 30 days after the specified comment date for the particular application. A competing preliminary permit application must conform with 18 CFR 4.30(b) and 4.36.

o. *Competing Development Application:* Any qualified development applicant desiring to file a competing development application must submit to the Commission, on or before a specified comment date for the particular application, either a competing development application or a notice of intent to file such an application. Submission of a timely notice of intent to file a development application allows an interested person to file the competing application no later than 120 days after the specified comment date for the particular application. A competing license application must conform with 18 CFR 4.30(b) and 4.36.

p. *Notice of Intent:* A notice of intent must specify the exact name, business address, and telephone number of the prospective applicant, and must include an unequivocal statement of intent to submit, if such an application may be filed, either a preliminary permit application or a development application (specify which type of application). A notice of intent must be served on the applicant(s) named in this public notice.

q. *Proposed Scope of Studies Under Permit:* A preliminary permit, if issued, does not authorize construction. The term of the proposed preliminary permit would be 36 months. The work proposed under the preliminary permit would include economic analysis, preparation of preliminary engineering plans, and a study of environmental impacts. Based on the results of these studies, the Applicant would decide whether to proceed with the preparation of a development application to construct and operate the project.

r. *Comments, Protests, or Motions to Intervene:* Anyone may submit comments, a protest, or a motion to intervene in accordance with the requirements of Rules of Practice and Procedure, 18 CFR 385.210, .211, .214. In determining the appropriate action to take, the Commission will consider all protests or other comments filed, but only those who file a motion to intervene in accordance with the Commission's Rules may become a party to the proceeding. Any comments, protests, or motions to intervene must be received on or before the specified comment date for the particular application.

Comments, protests and interventions may be filed electronically via the Internet in lieu of paper; see 18 CFR 385.2001(a)(1)(iii) and the instructions on the Commission's Web site under ''e-filing'' link. The Commission strongly encourages electronic filing.

s. *Filing and Service of Responsive Documents:* Any filings must bear in all capital letters the title ''COMMENTS'', ''RECOMMENDATIONS FOR TERMS AND CONDITIONS'', ''PROTEST'', ''COMPETING APPLICATION'' or ''MOTION TO INTERVENE'', as applicable, and the Project Number of the particular application to which the filing refers. Any of the above-named documents must be filed by providing the original and the number of copies provided by the Commission's regulations to: The Secretary, Federal Energy Regulatory Commission, 888 First Street, NE., Washington, DC 20426. A copy of any motion to intervene must also be served upon each representative of the Applicant specified in the particular application.

t. *Agency Comments:* Federal, state, and local agencies are invited to file comments on the described application. A copy of the application may be obtained by agencies directly from the Applicant. If an agency does not file comments within the time specified for filing comments, it will be presumed to have no comments. One copy of an agency's comments must also be sent to the Applicant's representatives.

Magalie R. Salas,

Secretary.

[FR Doc. E6–10166 Filed 6–27–06; 8:45 am]

BILLING CODE 6717–01–P

DEPARTMENT OF ENERGY

Federal Energy Regulatory Commission

Notice of Application Accepted for Filing and Soliciting Motions To Intervene, Protests, and Comments

June 22, 2006.

Take notice that the following hydroelectric application has been filed with the Commission and is available for public inspection:

a. *Type of Application:* Preliminary Permit.

b. *Project No:* 12689–000.

c. *Date filed:* June 15, 2006.

d. *Applicant:* Public Utility District No. 1 of Snohomish County, Washington.

e. *Name of Project:* Spieden Channel Tidal Energy Project.

f. *Location:* The project would be located in Spieden Channel, between San Juan Island and Spieden Island, in San Juan County, Washington.

g. *Filed Pursuant to:* Federal Power Act, 16 U.S.C. 791(a)–825(r).

h. *Applicant Contacts:* Mr. Steven Klein, General Manager, P.O. Box 1107, 2320 California Street, Everett, WA 98206, (425) 783–8473.

i. *FERC Contact:* Chris Yeakel, (202) 502–8132.

j. *Deadline for filing comments, protests, and motions to intervene:* 60 days from the issuance date of this notice.

The Commission's Rules of Practice and Procedure require all intervenors filing documents with the Commission to serve a copy of that document on each person in the official service list for the project. Further, if an intervenor files comments or documents with the Commission relating to the merits of an issue that may affect the responsibilities of a particular resource agency, they must also serve a copy of the document on that resource agency.

k. *Description of Project:* The proposed project would consist of: (1) 168 Tidal In Stream Energy Conversion (TISEC) devices consisting of, (2) rotating propeller blades 20 meters in diameter, (3) integrated generators with a capacity of 50 kW, (4) anchoring systems, (5) mooring lines, and (6) interconnection transmission lines. The project is estimated to have an annual generation of 32.47 gigawatt-hours per-year, which would be distributed by the Snohomish County Public Utility District No. 1.

l. *Locations of Applications:* A copy of the application is available for inspection and reproduction at the Commission in the Public Reference Room, located at 888 First Street, NE., Room 2A, Washington, DC 20426, or by calling (202) 502–8371. This filing may also be viewed on the Commission's Web site at *http://www.ferc.gov* using the ''eLibrary'' link. Enter the docket number excluding the last three digits in the docket number field to access the document. For assistance, call toll-free 1–866–208–3676 or e-mail *FERCOnlineSupport@ferc.gov*. For TTY, call (202) 502–8659. A copy is also available for inspection and reproduction at the address in item h above.

m. Individuals desiring to be included on the Commission's mailing list should so indicate by writing to the Secretary of the Commission.

n. *Competing Preliminary Permit:* Anyone desiring to file a competing application for preliminary permit for a proposed project must submit the competing application itself, or a notice of intent to file such an application, to the Commission on or before the specified comment date for the particular application (see 18 CFR 4.36). Submission of a timely notice of intent allows an interested person to file the competing preliminary permit application no later than 30 days after the specified comment date for the particular application. A competing preliminary permit application must conform with 18 CFR 4.30(b) and 4.36.

o. *Competing Development Application:* Any qualified development applicant desiring to file a competing development application must submit to the Commission, on or before a specified comment date for the particular application, either a competing development application or a notice of intent to file such an application. Submission of a timely notice of intent to file a development application allows an interested person to file the competing application no later than 120 days after the specified comment date for the particular application. A competing license application must conform with 18 CFR 4.30(b) and 4.36.

p. *Notice of Intent:* A notice of intent must specify the exact name, business address, and telephone number of the prospective applicant, and must include an unequivocal statement of intent to submit, if such an application may be filed, either a preliminary permit application or a development application (specify which type of application). A notice of intent must be served on the applicant(s) named in this public notice.

q. *Proposed Scope of Studies Under Permit:* A preliminary permit, if issued, does not authorize construction. The term of the proposed preliminary permit would be 36 months. The work proposed under the preliminary permit would include economic analysis, preparation of preliminary engineering plans, and a study of environmental impacts. Based on the results of these studies, the Applicant would decide whether to proceed with the preparation of a development application to construct and operate the project.

r. *Comments, Protests, or Motions to Intervene:* Anyone may submit comments, a protest, or a motion to intervene in accordance with the requirements of Rules of Practice and Procedure, 18 CFR 385.210, .211, .214. In determining the appropriate action to take, the Commission will consider all protests or other comments filed, but only those who file a motion to intervene in accordance with the Commission's Rules may become a party to the proceeding. Any comments, protests, or motions to intervene must be received on or before the specified comment date for the particular application.

Comments, protests and interventions may be filed electronically via the Internet in lieu of paper; see 18 CFR 385.2001(a)(1)(iii) and the instructions on the Commission's Web site under ''e-filing'' link. The Commission strongly encourages electronic filing.

s. *Filing and Service of Responsive Documents:* Any filings must bear in all capital letters the title ''COMMENTS'', ''RECOMMENDATIONS FOR TERMS AND CONDITIONS'', ''PROTEST'', ''COMPETING APPLICATION'' or ''MOTION TO INTERVENE'', as applicable, and the Project Number of the particular application to which the filing refers. Any of the above-named documents must be filed by providing the original and the number of copies provided by the Commission's regulations to: The Secretary, Federal Energy Regulatory Commission, 888 First Street, NE., Washington, DC 20426. A copy of any motion to intervene must also be served upon each representative of the Applicant specified in the particular application.

t. *Agency Comments:* Federal, state, and local agencies are invited to file comments on the described application. A copy of the application may be obtained by agencies directly from the Applicant. If an agency does not file comments within the time specified for filing comments, it will be presumed to have no comments. One copy of an agency's comments must also be sent to the Applicant's representatives.

Magalie R. Salas,

Secretary.

[FR Doc. E6–10167 Filed 6–27–06; 8:45 am]

BILLING CODE 6717–01–P

DEPARTMENT OF ENERGY

Federal Energy Regulatory Commission

Notice of Application Accepted for Filing and Soliciting Motions To Intervene, Protests, and Comments

June 22, 2006.

Take notice that the following hydroelectric application has been filed with the Commission and is available for public inspection:

a. *Type of Application:* Preliminary Permit.

b. *Project No:* 12690–000.

c. *Date filed:* June 15, 2006.

d. *Applicant:* Public Utility District No. 1 of Snohomish County, Washington.

e. *Name of Project:* Admiralty Inlet Tidal Energy Project.

f. *Location:* The project would be located in Admiralty Inlet in the northwestern portion of Puget Sound, between the Olympic Peninsula and Whidbey Island, in Jefferson, Kitsap and Island Counties, Washington.

g. *Filed Pursuant to:* Federal Power Act, 16 U.S.C. 791(a)–825(r).

h. *Applicant Contacts:* Mr. Steven Klein, General Manager, P.O. Box 1107, 2320 California Street, Everett, WA 98206, (425) 783–8473.

i. *FERC Contact:* Chris Yeakel, (202) 502–8132.

j. *Deadline for filing comments, protests, and motions to intervene:* 60 days from the issuance date of this notice.

The Commission's Rules of Practice and Procedure require all intervenors filing documents with the Commission to serve a copy of that document on each person in the official service list for the project. Further, if an intervenor files comments or documents with the Commission relating to the merits of an issue that may affect the responsibilities of a particular resource agency, they must also serve a copy of the document on that resource agency.

k. *Description of Project:* The proposed project would consist of: (1) 450 Tidal In Stream Energy Conversion (TISEC) devices consisting of, (2) rotating propeller blades 20 meters in diameter, (3) integrated generators with a capacity of 50 kW, (4) anchoring systems, (5) mooring lines, and (6) interconnection transmission lines. The project is estimated to have an annual generation of 146.2 gigawatt-hours per-year, which would be distributed by the Snohomish County Public Utility District.

l. *Locations of Applications:* A copy of the application is available for inspection and reproduction at the Commission in the Public Reference Room, located at 888 First Street NE., Room 2A, Washington, DC 20426, or by calling (202) 502–8371. This filing may also be viewed on the Commission's Web site at *http://www.ferc.gov* using the ''eLibrary'' link. Enter the docket number excluding the last three digits in the docket number field to access the document. For assistance, call toll-free 1–866–208–3676 or e-mail *FERCOnlineSupport@ferc.gov*. For TTY, call (202) 502–8659. A copy is also available for inspection and reproduction at the address in item h above.

m. Individuals desiring to be included on the Commission's mailing list should so indicate by writing to the Secretary of the Commission.

n. *Competing Preliminary Permit:* Anyone desiring to file a competing application for preliminary permit for a proposed project must submit the competing application itself, or a notice of intent to file such an application, to the Commission on or before the specified comment date for the particular application (see 18 CFR 4.36). Submission of a timely notice of intent allows an interested person to file the competing preliminary permit application no later than 30 days after the specified comment date for the particular application. A competing preliminary permit application must conform with 18 CFR 4.30(b) and 4.36.

o. *Competing Development Application:* Any qualified development applicant desiring to file a competing development application must submit to the Commission, on or before a specified comment date for the particular application, either a competing development application or a notice of intent to file such an application. Submission of a timely notice of intent to file a development application allows an interested person to file the competing application no later than 120 days after the specified comment date for the particular application. A competing license application must conform with 18 CFR 4.30(b) and 4.36.

p. *Notice of Intent:* A notice of intent must specify the exact name, business address, and telephone number of the prospective applicant, and must include an unequivocal statement of intent to submit, if such an application may be filed, either a preliminary permit application or a development application (specify which type of application). A notice of intent must be served on the applicant(s) named in this public notice.

q. *Proposed Scope of Studies Under Permit:* A preliminary permit, if issued, does not authorize construction. The term of the proposed preliminary permit would be 36 months. The work proposed under the preliminary permit would include economic analysis, preparation of preliminary engineering plans, and a study of environmental impacts. Based on the results of these studies, the Applicant would decide whether to proceed with the preparation of a development application to construct and operate the project.

r. *Comments, Protests, or Motions to Intervene:* Anyone may submit comments, a protest, or a motion to intervene in accordance with the requirements of Rules of Practice and Procedure, 18 CFR 385.210, .211, .214. In determining the appropriate action to take, the Commission will consider all protests or other comments filed, but only those who file a motion to intervene in accordance with the Commission's Rules may become a party to the proceeding. Any comments, protests, or motions to intervene must be received on or before the specified comment date for the particular application.

Comments, protests and interventions may be filed electronically via the Internet in lieu of paper; See 18 CFR 385.2001(a)(1)(iii) and the instructions on the Commission's web site under ''e-filing'' link. The Commission strongly encourages electronic filing.

s. *Filing and Service of Responsive Documents:* Any filings must bear in all capital letters the title ''COMMENTS'', ''RECOMMENDATIONS FOR TERMS AND CONDITIONS'', ''PROTEST'', ''COMPETING APPLICATION'' or ''MOTION TO INTERVENE'', as applicable, and the Project Number of the particular application to which the filing refers. Any of the above-named documents must be filed by providing the original and the number of copies provided by the Commission's regulations to: The Secretary, Federal Energy Regulatory Commission, 888 First Street, NE., Washington, DC 20426. A copy of any motion to intervene must also be served upon each representative of the Applicant specified in the particular application.

t. *Agency Comments:* Federal, state, and local agencies are invited to file comments on the described application. A copy of the application may be obtained by agencies directly from the Applicant. If an agency does not file comments within the time specified for filing comments, it will be presumed to have no comments. One copy of an agency's comments must also be sent to the Applicant's representatives.

Magalie R. Salas,

Secretary.

[FR Doc. E6–10168 Filed 6–27–06; 8:45 am]

BILLING CODE 6717–01–P

DEPARTMENT OF ENERGY

Federal Energy Regulatory Commission

Notice of Application Accepted for Filing and Soliciting Motions To Intervene, Protests, and Comments

June 22, 2006.

Take notice that the following hydroelectric application has been filed with the Commission and is available for public inspection:

a. *Type of Application:* Preliminary Permit.

b. *Project No:* 12692–000.

c. *Date filed:* June 15, 2006.

d. *Applicant:* Public Utility District No. 1 of Snohomish County, Washington.

e. *Name of Project:* San Juan Channel Tidal Energy Project.

f. *Location:* The project would be located in San Juan Channel in the San Juan Islands in San Juan County, Washington.

g. *Filed Pursuant to:* Federal Power Act, 16 U.S.C. 791(a)–825(r).

h. *Applicant Contacts:* Mr. Steven Klein, General Manager, P.O. Box 1107, 2320 California Street, Everett, WA 98206, (425) 783–8473.

i. *FERC Contact:* Chris Yeakel, (202) 502–8132.

j. *Deadline for filing comments, protests, and motions to intervene:* 60 days from the issuance date of this notice.

The Commission's Rules of Practice and Procedure require all intervenors filing documents with the Commission to serve a copy of that document on each person in the official service list for the project. Further, if an intervenor files comments or documents with the Commission relating to the merits of an issue that may affect the responsibilities of a particular resource agency, they must also serve a copy of the document on that resource agency.

k. *Description of Project:* The proposed project would consist of: (1) 116 Tidal In Stream Energy Conversion (TISEC) devices consisting of, (2) rotating propeller blades 20 meters in diameter, (3) integrated generators with a capacity of 46 kW, (4) anchoring systems, (5) mooring lines, and (6) interconnection transmission lines. The project is estimated to have an annual generation of 33.27 gigawatt-hours per-year, which would be distributed by the Snohomish County Public Utility District.

l. *Locations of Applications:* A copy of the application is available for inspection and reproduction at the Commission in the Public Reference Room, located at 888 First Street NE., Room 2A, Washington, DC 20426, or by calling (202) 502–8371. This filing may also be viewed on the Commission's Web site at *http://www.ferc.gov* using the ''eLibrary'' link. Enter the docket number excluding the last three digits in the docket number field to access the document. For assistance, call toll-free 1–866–208–3676 or e-mail *FERCOnlineSupport@ferc.gov*. For TTY, call (202) 502–8659. A copy is also available for inspection and reproduction at the address in item h above.

m. Individuals desiring to be included on the Commission's mailing list should so indicate by writing to the Secretary of the Commission.

n. *Competing Preliminary Permit:* Anyone desiring to file a competing application for preliminary permit for a proposed project must submit the competing application itself, or a notice of intent to file such an application, to the Commission on or before the specified comment date for the particular application (see 18 CFR 4.36). Submission of a timely notice of intent allows an interested person to file the competing preliminary permit application no later than 30 days after the specified comment date for the particular application. A competing preliminary permit application must conform with 18 CFR 4.30(b) and 4.36.

o. *Competing Development Application:* Any qualified development applicant desiring to file a competing development application must submit to the Commission, on or before a specified comment date for the particular application, either a competing development application or a notice of intent to file such an application. Submission of a timely notice of intent to file a development application allows an interested person to file the competing application no later than 120 days after the specified comment date for the particular application. A competing license application must conform with 18 CFR 4.30(b) and 4.36.

p. *Notice of Intent:* A notice of intent must specify the exact name, business address, and telephone number of the prospective applicant, and must include an unequivocal statement of intent to submit, if such an application may be filed, either a preliminary permit application or a development application (specify which type of application). A notice of intent must be served on the applicant(s) named in this public notice.

q. *Proposed Scope of Studies Under Permit:* A preliminary permit, if issued, does not authorize construction. The term of the proposed preliminary permit would be 36 months. The work proposed under the preliminary permit would include economic analysis, preparation of preliminary engineering plans, and a study of environmental impacts. Based on the results of these studies, the Applicant would decide whether to proceed with the preparation of a development application to construct and operate the project.

r. *Comments, Protests, or Motions to Intervene:* Anyone may submit comments, a protest, or a motion to intervene in accordance with the requirements of Rules of Practice and Procedure, 18 CFR 385.210, .211, .214. In determining the appropriate action to take, the Commission will consider all protests or other comments filed, but only those who file a motion to intervene in accordance with the Commission's Rules may become a party to the proceeding. Any comments, protests, or motions to intervene must be received on or before the specified comment date for the particular application.

Comments, protests and interventions may be filed electronically via the Internet in lieu of paper; See 18 C.F.R. 385.2001(a)(1)(iii) and the instructions on the Commission's Web site under ''e-filing'' link. The Commission strongly encourages electronic filing.

s. *Filing and Service of Responsive Documents:* Any filings must bear in all capital letters the title ''COMMENTS'', ''RECOMMENDATIONS FOR TERMS AND CONDITIONS'', ''PROTEST'', ''COMPETING APPLICATION'' or ''MOTION TO INTERVENE'', as applicable, and the Project Number of the particular application to which the filing refers. Any of the above-named documents must be filed by providing the original and the number of copies provided by the Commission's regulations to: The Secretary, Federal Energy Regulatory Commission, 888 First Street, NE., Washington, DC 20426. A copy of any motion to intervene must also be served upon each representative of the Applicant specified in the particular application.

t. *Agency Comments:* Federal, state, and local agencies are invited to file comments on the described application. A copy of the application may be obtained by agencies directly from the Applicant. If an agency does not file comments within the time specified for filing comments, it will be presumed to have no comments. One copy of an

agency's comments must also be sent to the Applicant's representatives.

Magalie R. Salas,

Secretary.

[FR Doc. E6–10169 Filed 6–27–06; 8:45 am]

BILLING CODE 6717–01–P

DEPARTMENT OF ENERGY

Federal Energy Regulatory Commission

Notice of Application for Non-Project Use of Project Lands and Waters, Amendment of License, and Soliciting Comments, Motions to Intervene, and Protests

June 22, 2006.

Take notice that the following application has been filed with the Commission and is available for public inspection:

a. *Application Type:* Non-Project Use of Project Lands and Waters and Amendment of License.

b. *Project No:* 2452–191.

c. *Date filed:* June 12, 2006.

d. *Applicant:* Consumers Energy Company.

e. *Name of Project:* Hardy Project.

f. *Location:* The project is located on the Muskegon River in Newaygo County, MI.

g. *Filed Pursuant to:* Federal Power Act, 16 U.S.C. 791(a)–825(r) and 799 and 801.

h. *Applicant Contact:* James Bernier, 330 Chestnut St., Cadillac, MI 49601, (231) 779–5507.

i. *FERC Contact:* Hillary Berlin at 202–502–8915, or e-mail *hillary.berlin@ferc.gov.*

j. *Deadline for filing comments and or motions:* July 21, 2006.

All documents (original and eight copies) should be filed with: Magalie R. Salas, Secretary, Federal Energy Regulatory Commission, 888 First Street, NE., Washington, DC 20426. Please include the project number (P–2452–191) on any comments or motions filed. Comments, protests, and interventions may be filed electronically via the Internet in lieu of paper. See, 18 CFR 385.2001(a)(1)(iii) and the instructions on the Commission's Web site under the ''e-Filing'' link. The Commission strongly encourages e-filings.

k. *Description of Application:* The licensee requests Commission approval to convey an interest in project land to Muskegon River Development (MRD) to operate a private marina by reconstructing existing docks at the former Buck's Landing to increase the number of boat slips from 18 to 38. The proposal may include the future development of a public, non-motorized, unpaved foot path on project lands. The licensee also requests to amend their land management plan to designate a proposed Davis Bridge Park as a public recreation facility and add it to an existing recreational lease. Developing Davis Bridge Park would involve the upgrade of an existing access road, installation of an entry station, development of car and trailer parking spaces, installation of a single boat ramp with upstream and downstream erosion control measures, and picnic tables.

l. *Location of Application:* The filing is available for review at the Commission in the Public Reference Room, located at 888 First Street, NE., Room 2A, Washington, DC 20426, or may be viewed on the Commission's Web site at *http://www.ferc.gov* using the ''eLibrary'' link. Enter the docket number excluding the last three digits in the docket number field to access the document. For assistance, please contact FERC Online support at *FERCOnlineSupport@ferc.gov* or toll free (866) 208–3676 or TTY, contact (202) 502–8659.

m. Individuals desiring to be included on the Commission's mailing list should so indicate by writing to the Secretary of the Commission.

n. *Comments, Protests, or Motions to Intervene:* Anyone may submit comments, a protest, or a motion to intervene in accordance with the requirements of Rules of Practice and Procedure, 18 CFR 385.210, .211, .214. In determining the appropriate action to take, the Commission will consider all protests or other comments filed, but only those who file a motion to intervene in accordance with the Commission's Rules may become a party to the proceeding. Any comments, protests, or motions to intervene must be received on or before the specified comment date for the particular application.

o. *Filing and Service of Responsive Documents:* Any filings must bear in all capital letters the title ''COMMENTS'', ''RECOMMENDATIONS FOR TERMS AND CONDITIONS'', ''PROTEST'', or ''MOTION TO INTERVENE'', as applicable, and the Project Number of the particular application to which the filing refers. A copy of any motion to intervene must also be served upon each representative of the Applicant specified in the particular application.

p. *Agency Comments:* Federal, state, and local agencies are invited to file comments on the described application. A copy of the application may be obtained by agencies directly from the Applicant. If an agency does not file comments within the time specified for filing comments, it will be presumed to have no comments. One copy of an agency's comments must also be sent to the Applicant's representatives.

q. Comments, protests and interventions may be filed electronically via the Internet in lieu of paper. See, 18 CFR 385.2001(a)(1)(iii) and the instructions on the Commission's Web site at *http://www.ferc.gov* under the ''e-Filing'' link.

Magalie R. Salas,

Secretary.

[FR Doc. E6–10170 Filed 6–27–06; 8:45 am]

BILLING CODE 6717–01–P

FEDERAL COMMUNICATIONS COMMISSION

Notice of Public Information Collection(s) Being Reviewed by the Federal Communications Commission for Extension Under Delegated Authority

June 23, 2006.

SUMMARY: The Federal Communications Commission, as part of its continuing effort to reduce paperwork burden invites the general public and other Federal agencies to take this opportunity to comment on the following information collection(s), as required by the Paperwork Reduction Act (PRA) of 1995, Public Law 104–13. An agency may not conduct or sponsor a collection of information unless it displays a currently valid control number. No person shall be subject to any penalty for failing to comply with a collection of information subject to the Paperwork Reduction Act that does not display a valid control number. Comments are requested concerning (a) whether the proposed collection of information is necessary for the proper performance of the functions of the Commission, including whether the information shall have practical utility; (b) the accuracy of the Commission's burden estimate; (c) ways to enhance the quality, utility, and clarity of the information collected; and (d) ways to minimize the burden of the collection of information on the respondents, including the use of automated collection techniques or other forms of information technology.

DATES: Written Paperwork Reduction Act (PRA) comments should be submitted on or before August 28, 2006. If you anticipate that you will be submitting comments, but find it difficult to do so within the period of time allowed by this notice, you should

advise the contact listed below as soon as possible.

ADDRESSES: You may submit all your Paperwork Reduction Act (PRA) comments by e-mail or U.S. postal mail. To submit your comments by e-mail send them to *PRA@fcc.gov.* To submit your comments by U.S. mail, mark them to the attention of Cathy Williams, Federal Communications Commission, Room 1–C823, 445 12th Street, SW., Washington, DC 20554.

FOR FURTHER INFORMATION CONTACT: For additional information about the information collection(s) send an e-mail to *PRA@fcc.gov* or contact Cathy Williams at (202) 418–2918.

SUPPLEMENTARY INFORMATION:

OMB Control Number: 3060–0922.

Title: Broadcast Mid-Term Report.

Form Number: FCC Form 397.

Type of Review: Extension of a currently approved collection.

Respondents: Business or other for-profit entities; Not-for-profit institutions.

Number of Respondents: 4,300.

Estimated Time per Response: 0.50 hours.

Frequency of Response: Recordkeeping requirement; Mid-point reporting requirement.

Total Annual Burden: 269 hours.

Total Annual Cost: None.

Privacy Impact Assessment: No impact(s).

Needs and Uses: On November 7, 2002, the FCC adopted a Second Report and Order and Third NPRM (Second R&O), MM Docket No. 98–204, FCC 02–303, 68 FR 670 (2003), which established new EEO rules and forms to comply with the court's decision in *MD/DC/DE Broadcasters Association* v. *FCC.* The new rules adopt a new version of FCC Form 397. The new EEO rules also ensure equal employment opportunity in the broadcast and multi-channel video program distribution industries through outreach to the community in recruitment and prevention of employment discrimination. The new version of FCC Form 397 is filed only once at the mid-point of the eight-year license term of television licensees, with five or more full-time employees, and radio licensees, with eleven or more full-time employees. Licensees must include copies of EEO reports that are required to be placed in the licensees' local public file for the prior two years.

Federal Communications Commission.

Jacqueline R. Coles,

Associate Secretary, Agenda and Publications Group.

[FR Doc. E6–10188 Filed 6–28–06; 8:45 am]

BILLING CODE 6712–01–P

FEDERAL COMMUNICATIONS COMMISSION

[Report No. 2776]

Petitions for Reconsideration of Action in Rulemaking Proceeding

June 23, 2006.

Petitions for Reconsideration have been filed in the Commission's Rulemaking proceeding listed in this Public Notice and published pursuant to 47 CFR 1.429(e). The full text of these documents is available for viewing and copying in Room CY–B402, 445 12th Street, SW., Washington, DC or may be purchased from the Commission's copy contractor, Best Copy and Printing, Inc. (BCPI) (1–800–378–3160). Oppositions to these petitions must be filed by July 14, 2006. See Section 1.4(b)(1) of the Commission's rules (47 CFR 1.4(b)(1)). Replies to an opposition must be filed within 10 days after the time for filing oppositions have expired.

Subject: In the Matter of Implementation of the Commercial Spectrum Enhancement Act and Modernization of the Commission's Competitive Bidding Rules and Procedures (WT Docket No. 05–211).

Number of Petitions Filed: 3.

Marlene H. Dortch,

Secretary.

[FR Doc. 06–5823 Filed 6–28–06; 8:45 am]

BILLING CODE 6712–01–P

FEDERAL MEDIATION AND CONCILIATION SERVICE

Labor Management Cooperation Act of 1978 (Pub. L. 95–524)

AGENCY: Federal Mediation and Conciliation Service.

ACTION: Final Fiscal Year 2006, Program Guidelines/Application Solicitation for Labor-Management Committees.

SUMMARY: The Federal Mediation and Conciliation Service (FMCS) is publishing a final Fiscal Year 2006 Program Guidelines/Application Solicitation for the Labor-Management Cooperation Program. The program is supported by Federal funds authorized by the Labor-Management Cooperation Act of 1978, subject to annual appropriations. This solicitation contains a change in the length of grants and the deadline for accepting applications. FMCS reserves the right under special conditions to award supplemental (continuation) grants and will accept applications beginning August 1, 2006 and continue to do so until July 31, 2007 or until all Fiscal Year 2006 grant funds are obligated.

DATES: There were no comments received on the draft Fiscal Year 2006 Program Guidelines/Application Solicitation.

ADDRESSES: Maria A. Fried, General Counsel and Federal Register Liaison, Federal Mediation and Conciliation Service, 2100 K Street, NW., Washington, DC 20427. Comments may be submitted by fax at (202) 606–5345 or electronic mail (e-mail) to *mfried@fmcs.gov.* All comments and data in electronic form must be identified by the appropriate agency form number.

FOR FURTHER INFORMATION CONTACT: Linda Stubbs, Grants Management Specialist, FMCS 2100 K Street, NW., Washington, DC 20427. Telephone number 202–606–8181, e-mail to *lstubbs@fmcs.gov* or fax at (202) 606–3434.

Federal Mediation Conciliation Service—Labor-Management Cooperation Program; Application Solicitation for Labor-Management Committees FY 2006

A. Introduction

The following is the final Solicitation for the Fiscal Year (FY) 2006 cycle of the Labor-Management Cooperation Program as it pertains to the support of labor-management committees. These guidelines represent the continuing efforts of the Federal Mediation and Conciliation Service to implement the provisions of the Labor-Management Cooperation Act of 1978, which was initially implemented in FY 1981. The Act authorizes FMCS to provide assistance in the establishment and operation of company/plant, area, public sector, and industry-wide labor-management committees which:

(A) Have been organized jointly by employers and labor organizations representing employees in that company/plant, area, government agency, or industry; and

(B) Are established for the purpose of improving labor-management relationships, job security, and organizational effectiveness; enhancing economic development; or involving workers in decisions affecting their working lives, including improving communication with respect to subjects of mutual interest and concern.

The Program Description and other sections that follow, as well as a separately published FMCS Financial and Administrative Grants Manual, make up the basic guidelines, criteria, and program elements a potential applicant for assistance under this program must know in order to develop an application for funding consideration

for either a company/plant, area-wide, industry, or public sector labor-management committee. Directions for obtaining an application kit may be found in Section H. A copy of the Labor-Management Cooperation Act of 1978, included in the application kit, should be reviewed in conjunction with this solicitation.

B. Program Description

Objectives

The Labor-Management Cooperation Act of 1978 identifies the following seven general areas for which financial assistance would be appropriate:

(1) To improve communication between representatives of labor and management;

(2) To provide workers and employers with opportunities to study and explore new and innovative joint approaches to achieving organizational effectiveness;

(3) To assist workers and employers in solving problems of mutual concern not susceptible to resolution within the collective bargaining process;

(4) To study and explore ways of eliminating potential problems which reduce the competitiveness and inhibit the economic development of the company/plant, area, or industry;

(5) To enhance the involvement of workers in making decisions that affect their working lives;

(6) To expand and improve working relationships between workers and managers; and

(7) To encourage free collective bargaining by establishing continuing mechanisms for communication between employers and their employees through Federal assistance in the formation and operation of labor-management committees.

The primary objective of this program is to encourage and support the establishment and operation of joint labor-management committees to carry out specific objectives that meet the aforementioned general criteria. The term ''labor'' refers to employees represented by a labor organization and covered by a formal collective bargaining agreement. These committees may be found at the plant (company), area, industry, or public sector levels.

A plant or company committee is generally characterized as restricted to one or more organizational or productive units operated by a single employer. An area committee is generally composed of multiple employers of diverse industries as well as multiple labor unions operating within and focusing upon a particular city, county, contiguous multicounty, or statewide jurisdiction.

An industry committee generally consists of a collection of agencies or enterprises and related labor union(s) producing a common product or service in the private sector on a local, state, regional, or nationwide level. A public sector committee consists of government employees and managers in one or more units of a local or state government, managers and employees of public institutions of higher education, or of employees and managers of public elementary and secondary schools. Those employees must be covered by a formal collective bargaining agreement or other enforceable labor-management agreement. In deciding whether an application is for an area or industry committee, consideration should be given to the above definitions as well as to the focus of the committee.

In FY2006, competition will be open to company/plant, area, private industry, and public sector committees. Special consideration will be given to committee applications involving innovative or unique efforts. All application budget requests should focus directly on supporting the committee. Applicants should avoid seeking funds for activities that are clearly available under other Federal programs (*e.g.*, job training, mediation of contract disputes, etc.)

Required Program Elements

1. *Problem Statement*—The application should have numbered pages and discuss in detail what specific problem(s) face the company/plant, area, government, or industry and its workforce that will be addressed by the committee. Applicants must document the problem(s) using as much relevant data as possible and discuss the full range of impacts these problem(s) could have or are having on the company/plant, government, area, or industry. An industrial or economic profile of the area and workforce might prove useful in explaining the problem(s). This section basically discusses why the effort is needed.

2. *Results or Benefits Expected*—By using specific goals and objectives, the application must discuss in detail what the labor-management committee will accomplish during the life of the grant. Applications that promise to provide objectives after a grant is awarded will receive little or no credit in this area. While a goal of ''improving communication between employers and employees'' may suffice as one over-all goal of a project, the objectives must, whenever possible, be expressed in specific and measurable terms. Applicants should focus on the outcome, impacts or changes that the committee's efforts will have. Existing committees should focus on expansion efforts/results expected from FMCS funding. The goals, objectives, and projected impacts will become the foundation for future monitoring and evaluation efforts of the grantee, as well as the FMCS grants program.

3. *Approach*—This section of the application specifies how the goals and objectives will be accomplished. At a minimum, the following elements must be included in all grant applications:

(a) A discussion of the strategy the committee will employ to accomplish its goals and objectives;

(b) A listing, by name and title, of all existing or proposed members of the labor-management committee. The application should also offer a rationale for the selection of the committee members (*e.g.*, members represent 70% of the area or company/plant workforce).

(c) A discussion of the number, type, and role of all committee staff persons. Include proposed position descriptions for all staff that will have to be hired as well as resumes for staff already on board; noting, that grant funds may not be used to pay for existing employees; an assurance that grant funds will not be used to pay for existing employees;

(d) In addressing the proposed approach, applicants must also present their justification as to why Federal funds are needed to implement the proposed approach;

(e) A statement of how often the committee will meet (we require meetings at least every other month) as well as any plans to form subordinate committees for particular purposes; and

(f) For applications from existing committees, a discussion of past efforts and accomplishments and how they would integrate with the proposed expanded effort.

4. *Major Milestones*—This section must include an implementation plan that indicates what major steps, operating activities, and objectives will be accomplished as well as a timetable for when they will be finished. A milestone chart must be included that indicates what specific accomplishments (process and impact) will be completed by month over the life of the grant using ''month one'' as the start date. The accomplishment of these tasks and objectives, as well as problems and delays therein, will serve as the basis for quarterly progress reports to FMCS.

Applicants must prepare their budget narrative and milestone chart using a start date of ''month one'' and an end date of ''month twelve'' or ''month eighteen'', as appropriate. Thus, if

applicant is seeking a twelve month grant, use figures reflecting month one through twelve. If applicant is seeking an eighteen month grant, use figures reflecting month one through eighteen. If the grant application is funded; FMCS will identify the start and end date of the grant on the Application for Federal Assistance (SF–424) form.

5. *Evaluation*—Applicants must provide for either an external evaluation or an internal assessment of the project's success in meeting its goals and objectives. An evaluation plan must be developed which briefly discusses what basic questions or issues the assessment will examine and what baseline data the committee staff already has or will gather for the assessment. This section should be written with the application's own goals and objectives clearly in mind and the impacts or changes that the effort is expected to cause.

6. *Letters of Commitment*—Applications must include current letters of commitment from all proposed or existing committee participants and chairpersons. These letters should indicate that the participants support the application and will attend scheduled committee meetings. A blanket letter signed by a committee chairperson or other official on behalf of all members is not acceptable. We encourage the use of individual letters submitted on company or union letterhead represented by the individual. The letters should match the names provided under Section 3(b).

7. *Other Requirements*—Applicants are also responsible for the following:

(a) The submission of data indicating approximately how many employees will be covered or represented through the labor-management committee;

(b) From existing committees, a copy of the existing staffing levels, a copy of the by-laws (if any), a breakout of annual operating costs and identification of all sources and levels of current financial support;

(c) A detailed budget narrative that clearly identifies each line item and the estimated cost (a complete breakdown of each line item) based on policies and procedures contained in the FMCS Financial and Administrative Grants Manual;

(d) An assurance that the labor-management committee will not interfere with any collective bargaining agreements;

(e) An assurance that committee meetings will be held at least every other month and that written minutes of all committee meetings will be prepared and made available to FMCS; and

(f) An assurance that the maximum rate for an individual consultant paid from grant project can be no more than $950 for an eight-hour-day. The day includes preparation, evaluation and travel time. Also, time and effort records must be maintained.

Selection Criteria

The following criteria will be used in the scoring and selection of applications for award:

(1) The extent to which the application has clearly identified the problems and justified the needs that the proposed project will address.

(2) The degree to which appropriate and measurable goals and objectives have been developed to address the problems/needs of the applicant.

(3) The feasibility of the approach proposed to attain the goals and objectives of the project and the perceived likelihood of accomplishing the intended project results. This section will also address the degree of innovativeness or uniqueness of the proposed effort.

(4) The appropriateness of committee membership and the degree of commitment of these individuals to the goals of the application as indicated in the letters of support.

(5) The feasibility and thoroughness of the implementation plan in specifying major milestones and target dates.

(6) The cost effectiveness and fiscal soundness of the application's budget request, as well as the application's feasibility vis-a-vis its goals and approach.

(7) The overall feasibility of the proposed project in light of all of the information presented for consideration; and

(8) The value to the government of the application in light of the overall objectives of the Labor-Management Cooperation Act of 1978. This includes such factors as innovativeness, site location, cost, and other qualities that impact upon an applicant's value in encouraging the labor-management committee concept.

C. Eligibility

Eligible grantees include state and local units of government, labor-management committees (or a labor union, management association, or company on behalf of a committee that will be created through the grant), and certain third-party private non-profit entities on behalf of one or more committees to be created through the grant. Federal government agencies and their employees are not eligible.

Third-party private, non-profit entities that can document that a major purpose or function of their organization is the improvement of labor relations are eligible to apply. However, all funding must be directed to the functioning of the labor-management committee, and all requirements under Part B must be followed. Applications from third-party entities must document particularly strong support and participation from all labor and management parties with whom the applicant will be working. Applications from third-parties which do not directly support the operation of a new or expanded committee will not be deemed eligible, nor will applications signed by entities such as law firms or other third-parties failing to meet the above criteria.

Successful grantees will be bound by OMB Circular 110 i.e. ''contractors that develop or draft specifications, requirements, statements of work, and invitations for bids and/or requests for proposals shall be *excluded* (emphasis added from competing for such procurements).

Applicants who received funding under this program in the last 6 years for committee operations are not eligible to re-apply. The only exception will be made for grantees that seek funds on behalf of an entirely different committee whose efforts are totally outside of the scope of the original grant.

D. Allocations

The FY2006 appropriation for this program is $396,000. The Grant Review Board will review submissions and make recommendations for awards based on merit without regard to category.

In addition, to the competitive process identified in the preceding paragraph, FMCS will subject to funds availability, set aside a sum not to exceed thirty percent of its non-reserved appropriation to be awarded on a non-competitive basis. These funds will be used only to support applications that have been solicited by the Director of the Service and are not subject to the dollar range noted in Section E. All funds returned to FMCS from a competitive grant award may be awarded on a non-competitive basis in accordance with budgetary requirements.

FMCS reserves the right to retain up to five percent of the FY2006 appropriation to contract for program support purposes (such as evaluation) other than administration.

E. Dollar Range and Length of Grants

Awards to expand existing or establish new labor-management committees will be for a period of up to 18 months. If successful progress is

made during this initial budget period and all grant funds are not obligated within the specified period, these grants may be extended for up to six months. The dollar range of awards is as follows:

—Up to $65,000 over a period of up to 18 months for company/plant committees or single department public sector applicants;

—Up to $125,000 per 18-month period for area, industry, and multi-department public sector committee applicants.

Additionally, FMCS reserves the right under special conditions to award supplemental (continuation) grants subject to funds availability. If awarded the additional amount is added to the current grant amount.

Applicants are reminded that these figures represent maximum Federal funds only. If total costs to accomplish the objectives of the application exceed the maximum allowable Federal funding level and its required grantee match, applicants may supplement these funds through voluntary contributions from other sources. Applicants are also strongly encouraged to consult with their local or regional FMCS field office to determine what kinds of training may be available at no cost before budgeting for such training in their applications. A list of our field leadership team and their phone numbers may be obtained from the FMCS web site (*http://www.fmcs.gov*) under ''Who We Are.''

F. Cash Match Requirements and Cost Allowability

All applicants must provide at least 10 percent of the total allowable project costs in cash. Matching funds may come from state or local government sources or private sector contributions, but may generally not include other Federal funds. Funds generated by grant-supported efforts are considered ''project income,'' and may not be used for matching purposes.

It is the policy of this program to reject all requests for indirect or overhead costs as well as ''in-kind'' match contributions. In addition, grant funds must not be used to supplant private or local/state government funds currently spent for committee purposes. Funding requests from existing committees should focus entirely on the costs associated with the expansion efforts. Also, under no circumstances may business or labor officials participating on a labor-management committee be compensated out of grant funds for time spent at committee meetings or time spent in committee training sessions. Applicants generally will not be allowed to claim all or a portion of existing full-time staff as an expense or match contribution. For a more complete discussion of cost allowability, applicants are encouraged to consult the FY2006 FMCS Financial and Administrative Grants Manual, which will be included in the application kit.

G. Application Submission and Review Process

The Application for Federal Assistance (SF–424) form must be signed by *both* a labor and management representative. In lieu of signing the SF–424 form, representatives may type their name, title, and organization on plain bond paper with a signature line signed and dated, in accordance with block 18 of the SF–424 form. The individual listed as contact person in block 6 on the application form will generally be the only person with whom FMCS will communicate during the application review process. Please be sure that person is available once the application has been submitted. Additionally, it is the applicant's responsibility to notify FMCS in writing of any changes (*e.g.* if the address or contact person has changed).

We will accept applications beginning August 1, 2006, and continue to do so until July 31, 2007, or until all FY 2006 grant funds are obligated. Awards will be made by September 30, 2007. Proposals may be accepted at any time between August 1, 2006 and July 31, 2007, but proposals received late in the cycle have a greater risk of not being funded due to unavailability of funds. Once your application has been received and acknowledged by FMCS, no applications or supplementary materials will be accepted thereafter. Applicants are highly advised to contact the grants director prior to committing any resources to the preparation of a proposal.

An original application containing numbered pages, plus three copies, should be addressed to the Federal Mediation and Conciliation Service, Labor-Management Grants Program, 2100 K Street, NW., Washington, DC 20427. FMCS will not consider videotaped submissions or video attachments to submissions. FMCS will confirm receipt of all applications within 10 days thereof.

All eligible applications will be reviewed and scored by a Grant Review Board. The Board(s) will recommend selected applications for rejection or further funding consideration. The Director or their designee will finalize the scoring and selection process. All FY 2006 grant applicants will be notified of results and all grant awards will be made by September 30, 2007. Applications that fail to adhere to eligibility or other major requirements will be administratively rejected by the Director or their designee.

H. Contact

Individuals wishing to apply for funding under this program should contact the Federal Mediation and Conciliation Service as soon as possible to obtain an application kit. Please consult the FMCS Web site (*http://www.fmcs.gov*) to download forms and information. These kits and additional information or clarification can be obtained free of charge by contacting the Federal Mediation and Conciliation Service, Labor-Management Grants Program, 2100 K Street, NW., Washington, DC 20427, Linda Stubbs at (202) 606–8181 (*lstubbs@fmcs.gov*).

Additionally, we are currently accepting applications for FY2005 grant cycle and will do so until July 31, 2006 or until all FY2005 funding has been obligated. Please consult the FMCS Web site (*http://www.fmcs.gov*) to download forms and information.

Fran Leonard,

Director, Budget and Finance, Federal Mediation and Conciliation Service.

[FR Doc. 06–5831 Filed 6–28–06; 8:45 am]

BILLING CODE 6732–01–P

FEDERAL RESERVE SYSTEM

Formations of, Acquisitions by, and Mergers of Bank Holding Companies

The companies listed in this notice have applied to the Board for approval, pursuant to the Bank Holding Company Act of 1956 (12 U.S.C. 1841 *et seq.*) (BHC Act), Regulation Y (12 CFR Part 225), and all other applicable statutes and regulations to become a bank holding company and/or to acquire the assets or the ownership of, control of, or the power to vote shares of a bank or bank holding company and all of the banks and nonbanking companies owned by the bank holding company, including the companies listed below.

The applications listed below, as well as other related filings required by the Board, are available for immediate inspection at the Federal Reserve Bank indicated. The application also will be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing on the standards enumerated in the BHC Act (12 U.S.C. 1842(c)). If the proposal also involves the acquisition of a nonbanking company, the review also

includes whether the acquisition of the nonbanking company complies with the standards in section 4 of the BHC Act (12 U.S.C. 1843). Unless otherwise noted, nonbanking activities will be conducted throughout the United States. Additional information on all bank holding companies may be obtained from the National Information Center website at *www.ffiec.gov/nic/*.

Unless otherwise noted, comments regarding each of these applications must be received at the Reserve Bank indicated or the offices of the Board of Governors not later than July 24, 2006.

A. Federal Reserve Bank of New York (Jay Bernstein, Bank Supervision Officer) 33 Liberty Street, New York, New York 10045-0001:

1. The Adirondack Trust Company Employee Stock Ownership Trust, Saratoga Springs, NewYork; to acquire 50 additional shares of 473 Broadway Holding Corporation and to acquire one thousand shares of The Adirondack Trust Company, both of Saratoga Springs, New York.

B. Federal Reserve Bank of St. Louis (Glenda Wilson, Community Affairs Officer) 411 Locust Street, St. Louis, Missouri 63166-2034:

1. Evergreen Bancshares, Inc., St. Louis, Missouri; to become a bank holding company by merging with Bancorp IV, Inc., Stilwell, Kansas, and thereby indirectly acquire Bank of Montgomery County, Wellsville, Missouri.

Board of Governors of the Federal Reserve System, June 23, 2006.

Robert deV. Frierson,

Deputy Secretary of the Board.

[FR Doc. E6–10214 Filed 6–28–06; 8:45 am]

BILLING CODE 6210–01–S

FEDERAL RESERVE SYSTEM

Notice of Proposals to Engage in Permissible Nonbanking Activities or to Acquire Companies that are Engaged in Permissible Nonbanking Activities

The companies listed in this notice have given notice under section 4 of the Bank Holding Company Act (12 U.S.C. 1843) (BHC Act) and Regulation Y (12 CFR Part 225) to engage *de novo*, or to acquire or control voting securities or assets of a company, including the companies listed below, that engages either directly or through a subsidiary or other company, in a nonbanking activity that is listed in § 225.28 of Regulation Y (12 CFR 225.28) or that the Board has determined by Order to be closely related to banking and permissible for bank holding companies. Unless otherwise noted, these activities will be conducted throughout the United States.

Each notice is available for inspection at the Federal Reserve Bank indicated. The notice also will be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing on the question whether the proposal complies with the standards of section 4 of the BHC Act. Additional information on all bank holding companies may be obtained from the National Information Center website at *www.ffiec.gov/nic/*.

Unless otherwise noted, comments regarding the applications must be received at the Reserve Bank indicated or the offices of the Board of Governors not later than July 12, 2006.

A. Federal Reserve Bank of Cleveland (Cindy West, Manager) 1455 East Sixth Street, Cleveland, Ohio 44101-2566:

1. Rurban Financial Corp and Rurbanc Data Services, Inc., both of Defiance, Ohio; to acquire Diverse Computer Marketers, Inc., Lansing, Michigan, and DCM Indiana Inc., Plainfield, Indiana, pursuant to section 225.28(b)(14)(i) of Regulation Y.

Board of Governors of the Federal Reserve System, June 23, 2006.

Robert deV. Frierson,

Deputy Secretary of the Board.

[FR Doc. E6–10215 Filed 6–28–06; 8:45 am]

BILLING CODE 6210–01–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality

Solicitation for Nominations for Members of the U.S. Preventive Services Task Force

AGENCY: Agency for Healthcare Research and Quality (AHRQ), HHS.

ACTION: Solicits nominations for new members.

SUMMARY: The Agency for Healthcare Research and Quality (AHRQ) invites nominations of individuals qualified to serve as members of the U.S. Preventive Services Task Force (the Task Force).

The Task Force, a standing, independent panel of private-sector experts in prevention and primary care, is composed of members appointed to serve for four year terms with an option for reappointment. New members are selected each year to replace (approximately) one fourth of the Task Force members, i.e., those who are completing their appointments. Individuals nominated but not appointed in previous years, as well as those newly nominated, are considered in the annual selection process.

Task Force members meet three times a year for two days in the Washington, DC area. Member duties include reviewing and preparing comments (off site) on systematic evidence reviews prior to discussing and making recommendations on preventive services, drafting final recommendation documents, and participating in workgroups on specific topics or methods.

AHRQ particularly encourages nominations of women, members of minority populations, and persons with disabilities. Interested individuals and organizations may nominate one or more persons qualified for membership on the Task Force.

Qualification Requirements: The mission of the Task Force is to produce evidence-based recommendations on the appropriate screening, counseling, and provision of preventive medication for asymptomatic patients seen in the primary care setting. Therefore, in order to qualify for the Task Force, an applicant or nominee MUST demonstrate the following:

1. Knowledge and experience in the critical evaluation of research published in peer reviewed literature and in the methods of evidence review;

2. Understanding and experience in the application of synthesized evidence to clinical decision-making and/or policy;

3. Expertise in disease prevention and health promotion;

4. Ability to work collaboratively with peers; and,

5. Clinical expertise in the primary health care of children and/or adults, and/or expertise in counseling and behavioral interventions for primary care patients. Some Task Force members without primary health care clinical experience may be selected based on their expertise in methodological issues such as medical decision making, clinical epidemiology, behavioral medicine, and health economics.

Strongest consideration will be given to individuals who are recognized nationally or internationally for scientific leadership within their field of expertise. Applicants must have no substantial conflicts of interest that would impair in the scientific integrity of the work of the Task Force including financial, intellectual, or other conflicts.

DATES: All nominations submitted in writing or electronically, and received by Monday, July 31, 2006, will be considered for appointment to the Task Force.

Nominated individuals will be selected for the Task Force on the basis

of their qualifications (in particular, those that address the required qualifications, outlined above) and the current expertise needs of the Task Force. It is anticipated that 2 individuals will be invited to serve on the Task Force beginning in January, 2007. AHRQ will retain and consider for future vacancies the nominations of those not selected during this cycle.

ADDRESSES: Submit your response to: Helen Burstin, MD MPH, ATTN: USPSTF Nominations, Center for Primary Care, Prevention, and Clinical Partnerships, Agency for Healthcare Research and Quality, 540 Gaither Road, Rockville, Maryland 20850.

Nomination Submissions

Nominations may submitted in writing or electronically, but must include (1) the applicant's current curriculum vitae, and (2) a letter explaining how this individual meets the qualification requirements and how he/she would contribute to the Task Force. The letter should also attest to the nominee's willingness to serve as a member of the Task Force.

AHRQ will later ask persons under serious consideration for membership to provide detailed information that will permit evaluation of possible significant conflicts of interest. Such information will concern matters such as financial holdings, consultancies, and research grants or contracts.

Nomination Selection

Nominations for the Task Force will be selected on the basis of qualifications as outlined above (see qualification requirements) and the current expertise needs of the Task Force.

Arrangement for Public Inspection

Nominations and applications are kept on file at the Center for Primary Care, Prevention and Clinical Partnerships, and are available for review during business hours. AHRQ does not reply to individual responses, but considers all nominations in selecting members. Information regarded as private and personal, such as a nominee's social security number, home and internet addresses, home telephone and fax numbers, or names of family members will not be disclosed to the public. This is in accord with agency confidentiality policies and Department regulations (45 CFR 5.67).

FOR FURTHER INFORMATION CONTACT: Therese Miller at *therese.miller@ahrq.hhs.gov.*

SUPPLEMENTARY INFORMATION:

Background

Under Title IX of the Public Health Service Act, AHRQ is charged with enhancing the quality, appropriateness, and effectiveness of health care services and access to such services. AHRQ accomplishes these goals through scientific research and promotion of improvements in clinical practice, including prevention of diseases and other health conditions, and improvements in the organization, financing, and delivery of health care services (42 U.S.C. 299–299c–7 as amended).

The Task Force is an independent expert panel, first established in 1984 under the auspices of the U.S. Public Health Service, Currently, the USPSTF, under AHRQ's authorizing legislation (see in particular, 42 U.S.C. 299b–4(a)), is convened at the call of the Director of AHRQ. The Task Force is charged with rigorously evaluating the effectiveness, cost-effectiveness and appropriateness of clinical preventive services and formulating or updating recommendations for primary are clinicians regarding the appropriate provision of preventive services. The USPSTF transitioned to a standing Task Force in 2001. Current Task Force recommendations and associated evidence reviews are available on the Internet (*http://www.preventiveservices.ahrq.gov*).

Dated: June 22, 2006.

Carolyn M. Clancy,

Director.

[FR Doc. 06–5782 Filed 6–28–06; 8:45 am]

BILLING CODE 4160–90–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Statement of Organization, Functions, and Delegations of Authority

Part C (Centers for Disease Control and Prevention) of the Statement of Organization, Functions, and Delegations of Authority of the Department of Health and Human Services (45 FR 67772–76, dated October 14, 1980, and corrected at 45 FR 69296, October 20, 1980, as amended most recently at 71 FR 32349–32350, dated June 5, 2006) is amended to reflect the reorganization of the Office of the Chief Science Officer, Office of the Director, Centers for Disease Control and Prevention.

Section C–B, Organization and Functions, is hereby amended as follows:

Revise the functional statement for the *Office of the Chief Science Officer (CAS),* as follows:

After item (12), insert the following item: (13) provides oversight, training, monitoring, and quality assurance in the use of animals in research.

Delete item (10) of the functional statement for the *Scientific Resources Program (CVCE), National Center for Infectious Diseases (CVC),* and renumber the remaining items accordingly.

Dated: June 22, 2006.

William H. Gimson,

Chief Operating Officer, Centers for Disease Control and Prevention (CDC).

[FR Doc. 06–5785 Filed 6–28–06; 8:45 am]

BILLING CODE 4160–18–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. 2006N–0021]

Agency Information Collection Activities; Submission for Office of Management and Budget Review; Comment Request; Request for Samples and Protocols

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing that a proposed collection of information has been submitted to the Office of Management and Budget (OMB) for review and clearance under the Paperwork Reduction Act of 1995.

DATES: Fax written comments on the collection of information by July 31, 2006.

ADDRESSES: OMB is still experiencing significant delays in the regular mail, including first class and express mail, and messenger deliveries are not being accepted. To ensure that comments on the information collection are received, OMB recommends that written comments be faxed to the Office of Information and Regulatory Affairs, OMB, Attn: FDA Desk Officer, FAX: 202–395–6974.

FOR FURTHER INFORMATION CONTACT: Jonna Capezzuto, Office of Management Programs (HFA–250), Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857, 301–827–4659.

SUPPLEMENTARY INFORMATION: In compliance with 44 U.S.C. 3507, FDA has submitted the following proposed collection of information to OMB for review and clearance.

Request for Samples and Protocols — (OMB Control Number 0910–0206) — Extension

Under section 351 of the Public Health Service Act (42 U.S.C. 262), FDA has the responsibility to issue regulations that prescribe standards designed to ensure that the biologics licenses for such products are only issued when a product meets the prescribed standards. Under § 610.2 (21 CFR 610.2), FDA may at any time require manufacturers of licensed biological products to submit to FDA samples of any lot along with the protocols showing the results of applicable tests prior to marketing the lot of the product. In addition to § 610.2, there are other regulations that require the submission of samples and protocols for specific licensed biological products: § 660.6 (21 CFR 660.6) (Antibody to Hepatitis B Surface Antigen), 660.36 (21 CFR 660.36) (Reagent Red Blood Cells), and 660.46 (21 CFR 660.46)(Hepatitis B Surface Antigen).

Section 660.6(a) provides requirements for the frequency of submission of samples from each lot of Antibody to Hepatitis B Surface Antigen product, and § 660.6(b) provides the requirements for the submission of a protocol containing specific information along with each required sample. For § 660.6 products subject to official release by FDA, one sample from each filling of each lot is required to be submitted along with a protocol consisting of a summary of the history of manufacture of the product, including all results of each test for which test results are requested by the Center for Biologics Evaluation and Research (CBER). After official release is no longer required, one sample along with a protocol is required to be submitted at an interval of 90 days. In addition, samples, which must be accompanied by a protocol, may at any time be required to be submitted to FDA if continued evaluation is deemed necessary.

Section 660.36(a) requires, after each routine establishment inspection by FDA, the submission of samples from a lot of final Reagent Red Blood Cell product along with a protocol containing specific information. Section 660.36(a)(2) requires that a protocol contain information including, but not limited to, manufacturing records, test records, and test results. Section 660.36(b) requires a copy of the antigenic constitution matrix specifying the antigens present or absent to be submitted to FDA at the time of initial distribution of each lot.

Section 660.46(a) provides requirements for the frequency of submission of samples from each lot of Hepatitis B Surface Antigen product, and § 660.46(b) provides the requirements for the submission of a protocol containing specific information along with each required sample. For § 660.46 products subject to official release by FDA, one sample from each filling of each lot is required to be submitted along with a protocol consisting of a summary of the history of manufacture of the product, including all results of each test for which test results are requested by CBER. After notification of official release is received, one sample along with a protocol is required to be submitted at an interval of 90 days. In addition, samples, which must be accompanied by a protocol, may at any time be required to be submitted to FDA if continued evaluation is deemed necessary.

Samples and protocols are required by FDA to help ensure the product meets the criteria for lot release that have been determined to be necessary by FDA. In cases of certain biological products (e.g., Albumin, Plasma Protein Fraction, and specified biotechnology and specified synthetic biological products) that are known to have lot-to-lot consistency, official lot release is not normally required. However, submissions of samples and protocols of these products may still be required for surveillance, licensing, and export purposes, or in the event that FDA obtains information that the manufacturing process may not result in consistent quality of the product.

The following burden estimate is for the protocols that are required to be submitted with each sample. The collection of samples is not a collection of information under 5 CFR 1320.3(h)(2). Respondents to the collection of information under § 610.2 are manufacturers of licensed biological products. Respondents to the collection of information under § 660.6(b), 660.36(a)(2) and (b), and 660.46(b) are manufacturers of the specific products referenced previously in this document. The estimated number of respondents for each regulation is based on the annual number of manufacturers that submitted samples and protocols for biological products including submissions for lot release, surveillance, licensing, or export. Based on information obtained from FDA's database system, approximately 70 manufacturer's submitted samples and protocols in fiscal year (FY) 2005, under the regulations cited previously in this document. FDA estimates that 65 manufacturers submitted protocols under § 610.2, and 4 manufacturers submitted protocols under the regulations (§§ 660.6 and 660.46) for the other specific products. FDA received no submissions under § 660.36, however FDA is using the estimate of one protocol submission in the event one is submitted in the future.

The estimated total annual responses are based on FDA's final actions completed in FY 2005, which totaled 4,930, for the various submission requirements of samples and protocols for the licensed biological products. The rate of final actions is not expected to change significantly in the next few years. The hours per response are based on information provided by industry. The burden estimates provided by industry ranged from 1 to 5.5 hours. Under § 610.2, the hours per response are based on the average of these estimates and rounded to 3 hours. Under the remaining regulations, the hours per response are based on the higher end of the estimate (rounded to 5 or 6 hours) since more information is generally required to be submitted in the protocol than under § 610.2.

In the **Federal Register** of January 24, 2006 (71 FR 3856), FDA published a 60-day notice requesting public comment on the information collection provisions. No comments were received.

FDA estimates the burden of this collection of information as follows:

TABLE 1.—ESTIMATED ANNUAL REPORTING BURDEN[1]

21 CFR Section	No. of Respondents	Annual Frequency per Response	Total Annual Responses	Hours per Respondent	Total Hours
610.2	65	74.1	4,816	3	14,448
660.6(b)	3	26	78	5	390

TABLE 1.—ESTIMATED ANNUAL REPORTING BURDEN[1]—Continued

21 CFR Section	No. of Respondents	Annual Frequency per Response	Total Annual Responses	Hours per Respondent	Total Hours
660.36(a)(2) and (b)	1	1	1	6	6
660.46(b)	1	35	35	5	175
Total	70				15,019

[1]There are no capital costs or operating and maintenance costs associated with this collection of information.

Dated: June 23, 2006.

Jeffrey Shuren,

Assistant Commissioner for Policy.

[FR Doc. 06–5805 Filed 6–28–06; 8:45 am]

BILLING CODE 4160–01–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. 2006N–0247]

Agency Information Collection Activities; Proposed Collection; Comment Request; Medical Device User Fee Cover Sheet

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing an opportunity for public comment on the proposed collection of certain information by the agency. Under the Paperwork Reduction Act of 1995 (the PRA), Federal agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension of an existing collection of information, and to allow 60 days for public comment in response to the notice. This notice solicits comments on Form FDA 3601 entitled ''Medical Device User Fee Cover Sheet'' which must be submitted along with certain medical device product applications, supplements, and fee payment of those applications.

DATES: Submit written or electronic comments on the collection of information by August 28, 2006.

ADDRESSES: Submit electronic comments on the collection of information to: *http://www.fda.gov/dockets/ecomments*. Submit written comments on the collection of information to the Division of Dockets Management (HFA–305), Food and Drug Administration, 5630 Fishers Lane, rm. 1061, Rockville, MD 20852. All comments should be identified with the docket number found in brackets in the heading of this document.

FOR FURTHER INFORMATION CONTACT: Denver Presley, Office of Management Programs (HFA–250), Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857, 301–827–1472.

SUPPLEMENTARY INFORMATION: Under the PRA (44 U.S.C. 3501–3520), Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. ''Collection of information'' is defined in 44 U.S.C. 3502(3) and 5 CFR 1320.3(c) and includes agency requests or requirements that members of the public submit reports, keep records, or provide information to a third party. Section 3506(c)(2)(A) of the PRA (44 U.S.C. 3506(c)(2)(A)) requires Federal agencies to provide a 60–day notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension of an existing collection of information, before submitting the collection to OMB for approval. To comply with this requirement, FDA is publishing notice of the proposed collection of information set forth in this document.

With respect to the following collection of information, FDA invites comments on these topics: (1) Whether the proposed collection of information is necessary for the proper performance of FDA's functions, including whether the information will have practical utility; (2) the accuracy of FDA's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques, when appropriate, and other forms of information technology.

Medical Device User Fee Cover Sheet; Form FDA 3601 (OMB Control Number 0910–0511)—Extension

The Federal Food, Drug, and Cosmetic Act (the act), as amended by the Medical Device User Fee and Modernization Act of 2002 (MDUFMA) (Public Law 107–250), authorizes FDA to collect user fees for certain medical device applications. Under this authority, companies pay a fee for certain new medical device applications or supplements submitted to the agency for review. Because the submission of user fees concurrently with applications and supplements is required, the review of an application cannot begin until the fee is submitted. Form FDA 3601, the ''Medical Device User Fee Cover Sheet'', is designed to provide the minimum necessary information to determine whether a fee is required for review of an application, to determine the amount of the fee required, and to account for and track user fees. The form provides a cross-reference of the fees submitted for an application with the actual application by using a unique number tracking system. The information collected is used by FDA's Center for Devices and Radiological Health (CDRH) and the Center for Biologics Evaluation and Research (CBER) to initiate the administrative screening of new medical device applications and supplemental applications.

According to FDA's database system, there are an estimated 4,600 manufacturers of products subject to MDUFMA. However, not all manufacturers will have any cover sheet submissions in a given year and some may have multiple cover sheet submissions. The total number of annual responses is based on the number of cover sheet submissions received by FDA in fiscal year 2005. CDRH received 4,436 annual responses that included the following submissions: 43 premarket approval applications (PMAs), 4,071 premarket notifications, 22 modular premarket applications, 1 product development protocol, 1 premarket report, 15 panel track supplements, 174 real-time supplements, and 109 180–day

supplements. CBER received 106 annual responses that included the following submissions: 2 PMAs, 16 biologics license applications, 84 premarket notifications, 1 modular premarket application, 2 180–day supplements, and 1 real-time supplement. The number of received annual responses in FY 2005 included the cover sheets for applications that were qualified for small businesses and fee waivers or reductions. The estimated hours per response are based on past FDA experience with the various cover sheet submissions, and range from 5 to 30 minutes. The hours per response are based on the average of these estimates.

FDA estimates the burden of this collection of information as follows:

TABLE 1.—ESTIMATED ANNUAL REPORTING BURDEN[1]

Form FDA No.	No. of Respondents	Annual Frequency per Response	Total Annual Responses	Hours per Response	Total Hours
3601	4,600	1	4,600	0.30	1,380
Total					1,380

[1]There are no capital costs or operating and maintenance costs associated with this collection of information.

Dated: June 23, 2006.

Jeffrey Shuren,

Assistant Commissioner for Policy.

[FR Doc. 06–5806 Filed 6–28–06; 8:45 am]

BILLING CODE 4160–01–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. 1998N–0359] (formerly 98N–0359)

Program Priorities in the Center for Food Safety and Applied Nutrition; Request for Comments

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice; request for comments.

SUMMARY: The Food and Drug Administration (FDA) is requesting comments concerning the establishment of program priorities in the Center for Food Safety and Applied Nutrition (CFSAN) for fiscal year (FY) 2007. As part of its annual planning, budgeting, and resource allocation process, CFSAN is reviewing its programs to set priorities and establish work product expectations. This notice is being published to give the public an opportunity to provide input into the priority-setting process.

DATES: Submit written or electronic comments by August 28, 2006.

ADDRESSES: Submit written comments concerning this document to the Division of Dockets Management (HFA–305), Food and Drug Administration, 5630 Fishers Lane, rm. 1061, Rockville, MD 20852. Submit electronic comments to *http://www.fda.gov/dockets/ecomments*.

FOR FURTHER INFORMATION CONTACT: Tracy Summers, Center for Food Safety and Applied Nutrition (HFS–007), Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20740, e-mail: *tsummers@.fda.hhs.gov*, 301–827–6733.

SUPPLEMENTARY INFORMATION:

I. Background

On May 3, 2006, CFSAN released a document entitled ''FY 2006 CFSAN Program Priorities.'' The document, a copy of which is available on CFSAN's Web page (*http://www.cfsan.fda.gov*) or from the contact person listed in the **FOR FURTHER INFORMATION CONTACT** section of this document, constitutes the center's priority workplan for FY 2006 (i.e., October 1, 2005, through September 30, 2006). The FY 2006 workplan is based on input we received from our stakeholders (see 70 FR 29328, May 20, 2005), as well as input generated internally. Throughout the priority-setting process, we focused on one central question: ''Where do we do the most good for consumers and the overall public health?'' The FY 2006 workplan was developed in recognition of a diminished budget, including projected reductions and redeployment of resources to achieve funding for priorities outlined in the President's FY 2007 budget.

The FY 2006 workplan is structured differently than previous years. It contains only those activities previously listed as ''A'' list items. Our goal is to fully complete at least 90 percent of the activities listed under sections 1 through 4 of the FY 2006 workplan by the end of the fiscal year, September 30, 2006. The FY 2006 workplan also includes a fifth section entitled ''Priority Ongoing Activities.'' Many of these activities are core functions that we perform on a regular basis and are among our very highest priorities.

II. 2007 CFSAN Program Priorities

FDA is requesting comments on what program priorities CFSAN should consider establishing for FY 2007. The input will be used to develop CFSAN's FY 2007 workplan. The workplan will set forth the center's program priorities for the period of October 1, 2006, through September 30, 2007. FDA intends to make the FY 2007 workplan available in the fall of 2006.

The format of the FY 2007 workplan will be similar to the FY 2006 workplan in that it will be divided into the following five sections:

(1) Ensuring Food Defense,

(2) Ensuring Food Safety,

(3) Improving Nutrition,

(4) Improving Dietary Supplement Safety, and

(5) Ensuring Cosmetic Safety.

While there will likely be continuity and follow-through on many activities between the 2006 and 2007 workplans, the final FY 2007 Congressional Appropriation will unquestionably affect what we will be able to commit to accomplish in FY 2007. Accordingly, FDA requests comments on broad program areas that should continue to be a priority as well as new program areas or activities that should be added as a high priority for FY 2007.

III. Comments

Interested persons may submit to the Division of Dockets Management (see **ADDRESSES**) written or electronic comments regarding this document. Submit a single copy of electronic comments or two paper copies of any mailed comments, except that individuals may submit one paper copy. Comments are to be identified with the docket number found in brackets in the heading of this document. Received comments may be seen in the Division of Dockets Management between 9 a.m. and 4 p.m., Monday through Friday.

Dated: June 23, 2006.

Jeffrey Shuren,

Assistant Commissioner for Policy.

[FR Doc. E6–10241 Filed 6–28–06; 8:45 am]

BILLING CODE 4160–01–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. 2006D–0191]

The Use of Bayesian Statistics in Medical Device Clinical Trials; Public Meeting

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice of public meeting.

SUMMARY: The Food and Drug Administration (FDA) is announcing the following public meeting: The Use of Bayesian Statistics in Medical Device Clinical Trials. The draft guidance entitled ''Guidance for the Use of Bayesian Statistics in Medical Device Clinical Trials'' provides FDA's recommendations on the use of Bayesian statistical methods in the design and analysis of medical device clinical trials.

DATES: The public meeting will be held on July 27, 2006, from 8:30 a.m. to 5 p.m. Registration for this meeting is required (see the Registration section of this document for details). Submit written or electronic comments on the draft guidance by August 21, 2006.

ADDRESSES: The public meeting will be held at The Universities at Shady Grove, 9630 Gudelsky Dr., Rockville, MD. Additional information about and directions to the facility are available on the Internet at *http://www.fda.gov/cdrh/meetings/072706-bayesian.html*. Submit written comments on the draft guidance to the Division of Dockets Management (HFA–305), Food and Drug Administration, 5630 Fishers Lane, rm. 1061, Rockville, MD 20852. Submit electronic comments to *http://www.fda.gov/dockets/ecomments*. Identify comments with the docket number found in brackets in the heading of this document.

FOR FURTHER INFORMATION CONTACT: Cindy Garris, Center for Devices and Radiological Health (HFZ–220), Food and Drug Administration, 1350 Piccard Dr., Rockville, MD 20850, 240–276–3150, ext. 121, FAX: 240–276–3151, e-mail: *Cynthia.garris@fda.hhs.gov*.

SUPPLEMENTARY INFORMATION:

I. Background

Bayesian statistics is a theory and approach to data analysis that provides a coherent method for learning from evidence as evidence accumulates. In situations where good information on clinical use of a device already exists, the Bayesian approach may enable FDA to reach the same decision on a device with a smaller-sized or shorter-duration pivotal trial. In other instances, a Bayesian approach can provide flexible methods for handling interim analyses and other modifications to trials. The draft guidance entitled ''Guidance for the Use of Bayesian Statistics in Medical Device Clinical Trials'' describes FDA's current thinking on statistical aspects of the design and analysis of medical device clinical trials that use Bayesian statistical methods. FDA announced the availability of the draft guidance on May 23, 2006 (71 FR 29651). The draft guidance is available at *http://www.fda.gov/cdrh/osb/guidance/1601.html*.

II. Agenda

FDA will provide presentations on the draft guidance entitled ''Guidance for the Use of Bayesian Statistics in Medical Device Clinical Trials'' in the morning. In the afternoon, panels will discuss the draft guidance. There will be opportunities for public participation throughout the day.

III. Registration

Online registration for the meeting is required. Acceptance will be on a first-registered, first-served basis. There are no assurances of onsite registration. Please register online at *http://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfsud/bayesian_meeting.cfm*.

FDA is pleased to provide the opportunity for interested persons to listen from a remote location to the live proceedings of the meeting. In order to ensure that a sufficient number of call-in lines are available, please register to listen to the meeting at *http://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfsud/bayesian_meeting.cfm* by July 21, 2006.

Persons without Internet access may call 240–276–3150, ext. 121, by July 21, 2006, to register for onsite meeting attendance or to register to listen to the meeting by phone. If you need special accommodations due to a disability, please contact Cindy Garris (see **FOR FURTHER INFORMATION CONTACT**) at least 7 days in advance of the meeting.

IV. Request for Input and Materials

FDA is interested in receiving input from stakeholders on the draft guidance. Send suggestions or recommendations to the Division of Dockets Management (see **ADDRESSES**). FDA will place an additional copy of any material it receives on the docket (Docket No. 2006D–0191). Suggestions, recommendations, and materials may be seen at the Division of Dockets Management (see **ADDRESSES**) between 9 a.m. and 4 p.m., Monday through Friday.

V. Transcripts

Following the meeting, transcripts will be available for review at the Division of Dockets Management (see **ADDRESSES**).

Dated: June 23, 2006.

Jeffrey Shuren,

Assistant Commissioner for Policy.

[FR Doc. 06–5804 Filed 6–26–06; 12:30 pm]

BILLING CODE 4160–01–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Proposed Collection: Comment Request

In compliance with the requirement for opportunity for public comment on proposed data collection projects (section 3506(c)(2)(A) of Title 44, United States Code, as amended by the Paperwork Reduction Act of 1995, Pub. L. 104–13), the Health Resources and Services Administration (HRSA) publishes periodic summaries of proposed projects being developed for submission to the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995. To request more information on the proposed project or to obtain a copy of the data collection plans and draft instruments, call the HRSA Reports Clearance Officer on (301) 443–1129.

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology.

Proposed Project: The Health Education Assistance Loan (HEAL) Program: Forms (OMB No. 0915–0043)—Extension

The Health Education Assistance Loan (HEAL) program continues to administer and monitor outstanding loans which were provided to eligible students to pay for educational costs in

a number of health professions. HEAL forms collect information that is required for responsible program management. The HEAL Repayment Schedule, Fixed and Variable, provides the borrower with the cost of a HEAL loan, the number and amount of payments, and the Truth-in-Lending disclosures. The Lender's Report on HEAL Student Loans Outstanding (Call Report) provides information on the status of loans outstanding by the number of borrowers and total number of loans whose loan payments are in various stages of the loan cycle, such as student education and repayment, and the corresponding dollar amounts. These forms are needed to provide borrowers with information on the cost of their loan(s) and to determine which lenders may have excessive delinquencies and defaulted loans.

The estimate of burden for the forms is as follows:

Form	Number of respondents	Responses per respondent	Total responses	Hours per response	Total burden hours
Repayment Schedule HRSA 502	8	666	5,328	.5	2,664
Call Report HRSA–512	20	4	80	.75	60
Total	28		5,408		2,724

Send comments to Susan G. Queen, Ph.D., HRSA Reports Clearance Officer, Room 10–33, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Written comments should be received within 60 days of this notice.

Dated: June 22, 2006.

Cheryl R. Dammons,

Director, Division of Policy Review and Coordination.

[FR Doc. E6–10236 Filed 6–28–06; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

''Low Income Levels'' Used for Various Health Professions and Nursing Programs Included in Titles III, VII and VIII of the Public Health Service Act

AGENCY: Health Resources and Services Administration, HHS.

ACTION: Notice.

SUMMARY: The Health Resources and Services Administration (HRSA) is updating income levels used to identify a ''low income family'' for the purpose of determining eligibility for programs that provide health professions and nursing training for individuals from disadvantaged backgrounds. These various programs are included in Titles III, VII and VIII of the Public Health Service (PHS) Act.

The Department periodically publishes in the **Federal Register** low income levels used to determine eligibility for grants and cooperative agreements to institutions providing training for (1) disadvantaged individuals, (2) individuals from disadvantaged backgrounds, or (3) individuals from ''low income families.''

SUPPLEMENTARY INFORMATION: The various health professions and nursing grant and cooperative agreement programs that use the low-income levels to determine whether an individual is from an economically disadvantaged background in making eligibility and funding determinations generally make awards to: Accredited schools of medicine, osteopathic medicine, public health, dentistry, veterinary medicine, optometry, pharmacy, allied health podiatric medicine, nursing, chiropractic, public or private nonprofit schools which offer graduate programs in behavioral health and mental health practice, and other public or private nonprofit health or education entities to assist the disadvantaged to enter and graduate from health professions and nursing schools. Some programs provide for the repayment of health professions or nursing education loans for disadvantaged students.

Low-Income Levels

The Secretary defines a ''low income family'' for programs included in Titles III, VII and VIII of the PHS Act as having an annual income that does not exceed 200 percent of the Department's poverty guidelines. A family is a group of two or more individuals related by birth, marriage, or adoption who live together or an individual who is not living with any relatives. Most HRSA programs use the income of the student's parents to compute low income status, while a few programs, depending upon the legislative intent of the program, programmatic purpose of the low income level, as well as the age and circumstances of the average participant, will use the student's family as long as he or she is not listed as a dependent upon the parents' tax form. Each program will announce the rationale and choice of methodology for determining low income levels in their program guidance. The Department's poverty guidelines are based on poverty thresholds published by the U.S. Bureau of the Census, adjusted annually for changes in the Consumer Price Index.

The Secretary annually adjusts the low income levels based on the Department's poverty guidelines and makes them available to persons responsible for administering the applicable programs. The income figures below have been updated to reflect increases in the Consumer Price Index through December 31, 2005.

Size of parents' family *	Income Level **
1	$19,600
2	26,400
3	33,200
4	40,000
5	46,800
6	53,600
7	60,400
8	67,200

* Includes only dependents listed on Federal income tax forms. Some programs will use the student's family rather than his or her parents' family.

** Adjusted gross income for calendar year 2005.

Dated: June 21, 2006.

Elizabeth M. Duke,

Administrator.

[FR Doc. E6–10238 Filed 6–28–06; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HOMELAND SECURITY

Agency Information Collection Activities: New Information Collection, Comment Request

ACTION: 60-Day Notice of Information Collection Under Review: CIS Ombudsman Case Problem Submission, Form G–1107. OMB Control No. 1615–NEW.

The Department of Homeland Security, Office of the Citizenship and Immigration Services (CIS) Ombudsman has submitted the following information collection request for review and clearance in accordance with the Paperwork Reduction Act of 1995. The information collection is published to obtain comments from the public and affected agencies. Comments are encouraged and will be accepted for sixty days until August 28, 2006.

Written comments and/or suggestions regarding the item(s) contained in this notice, especially regarding the estimated public burden and associated response time, should be directed to the Department of Homeland Security (DHS), Director, Regulatory Management Division, Clearance Office, 111 Massachusetts Avenue, 3rd floor, Washington, DC 20529. Comments may also be submitted to DHS via facsimile to 202–272–8352 or via e-mail at *rfs.regs@dhs.gov.* When submitting comments by e-mail please make sure to add Form Number G–1107 in the subject box. Written comments and suggestions from the public and affected agencies should address one or more of the following four points:

(1) Evaluate whether the collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;

(2) Evaluate the accuracy of the agency's estimate of the burden of the collection of information, including the validity of the methodology and assumptions used;

(3) Enhance the quality, utility, and clarity of the information to be collected; and

(4) Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, *e.g.*, permitting electronic submission of responses.

Overview of This Information Collection

(1) *Type of Information Collection:* New information collection.

(2) *Title of the Form/Collection:* CIS Ombudsman Case Problem Submission.

(3) *Agency form number, if any, and the applicable component of the Department of Homeland Security sponsoring the collection:* Form G–1107. Office of the Citizenship and Immigration Services Ombudsman.

(4) *Affected public who will be asked or required to respond, as well as a brief abstract: Primary:* Individuals or Households. This information collection is necessary for the CIS Ombudsman to identify problem areas, propose changes, and assist individuals experiencing problems during the processing of an immigration benefit with USCIS.

(5) *An estimate of the total number of respondents and the amount of time estimated for an average respondent to respond:* 2,600 responses at 1 hour per response.

(6) *An estimate of the total public burden (in hours) associated with the collection:* 2,600 annual burden hours.

If you have additional comments, suggestions, or need a copy of the proposed information collection instrument with instructions, or additional information, please visit the DHS Web site at: *http://uscis.gov/graphics/formsfee/forms/pra/index.htm.*

If additional information is required contact: USCIS, Regulatory Management Division, 111 Massachusetts Avenue, 3rd Floor, Washington, DC 20529, (202) 272–8377.

Dated: June 26, 2006.

Stephen Tarragon,

Deputy Director, Regulatory Management Division, U.S. Citizenship and Immigration Services.

[FR Doc. 06–5794 Filed 6–28–06; 8:45 am]

BILLING CODE 4410–10–P

DEPARTMENT OF HOMELAND SECURITY

Transportation Security Administration

Intent To Request Approval From OMB of One New Public Collection of Information: Traveler Identity Verification Form (TIVF)

AGENCY: Transportation Security Administration, DHS.

ACTION: Notice.

SUMMARY: The Transportation Security Administration (TSA) invites public comment on a new information collection requirement abstracted below that we will submit to the Office of Management and Budget (OMB) for approval in compliance with the Paperwork Reduction Act.

DATES: Send your comments by August 28, 2006.

ADDRESSES: Comments may be mailed or delivered to Katrina Wawer, Attorney-Advisor, Office of the Chief Counsel, TSA–2, Transportation Security Administration, 601 South 12th Street, Arlington, VA 22202–4220.

FOR FURTHER INFORMATION CONTACT: Katrina Wawer at the above address, or by telephone (571) 227–1995 or facsimile (571) 227–1381.

SUPPLEMENTARY INFORMATION:

Comments Invited

In accordance with the Paperwork Reduction Act of 1995 (44 U.S.C. 3501 *et seq.*), an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. Therefore, in preparation for OMB review and approval of the following information collection, TSA is soliciting comments to—

(1) Evaluate whether the proposed information requirement is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;

(2) Evaluate the accuracy of the agency's estimate of the burden;

(3) Enhance the quality, utility, and clarity of the information to be collected; and

(4) Minimize the burden of the collection of information on those who are to respond, including using appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

Information Collection Requirement

Purpose of Data Collection

In order to accurately and effectively assess threats to transportation, and in accordance with 49 U.S.C. 114(f), TSA has developed a redress process for individuals who are delayed or prohibited from boarding a flight as a result of the current Watch List clearance procedures performed by air carriers. TSA will collect information from individuals who believe they have been unfairly or incorrectly delayed, denied boarding, or identified for additional screening at our Nation's airports, on a Traveler Identity Verification Form (TIVF). This will allow TSA to properly identify and distinguish individuals who have a name similarity to an entry on either the No-Fly or Selectee lists, and to determine whether individuals who are on the No-Fly or Selectee lists are correctly included on those lists. In order to make these determinations, TSA will compare the identifying data provided on the TIVF to information about individuals identified on the No-Fly and Selectee lists.

Description of Data Collection

The likely respondents to this proposed information requirement are individuals who are delayed or prohibited from boarding a flight as a

result of the current Watch List clearance procedures conducted by air carriers. In order to seek redress, individuals will complete a Traveler Identity Verification Form, or TIVF (formerly called the Passenger Identity Verification Form (PIVF)). These individuals will submit the TIVF, under the penalty of perjury, to TSA, with either a copy of a U.S. Passport, or at least three documents containing certain personal identifying information, such as a birth certificate, driver's license, and voter registration card, as identified on the TIVF. In addition to collecting personally identifiable information, TSA will also collect incident information, including incident date, airline, and flight number as proof of travel. The TIVF will be available on the TSA Web site, at *http://www.tsa.gov.* Individuals will have the option to complete and submit the form online, or to download the form and mail it to TSA with the required documents. TSA estimates that approximately 26,000 individuals will avail themselves of the redress process for the Watch List clearance procedures on an annual basis. TSA estimates that completing the form, gathering, and submitting the information will take approximately one hour per respondent. Thus, TSA estimates the total annual hour burden for individuals seeking redress to be 26,000 hours.

Use of Results

TSA will use the information in support of the agency's redress process for individuals who believe they have been incorrectly delayed or denied boarding for a particular flight as a result of the current Watch List clearance procedure performed by air carriers. TSA will utilize the personally identifying information and proof of travel in order to expedite the watch list clearance process.

Issued in Arlington, Virginia, on June 22, 2006.

Lisa S. Dean,

Privacy Officer.

[FR Doc. E6–10232 Filed 6–28–06; 8:45 am]

BILLING CODE 9110–05–P

DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

[Docket No. FR–5041–N–22]

Notice of Proposed Information Collection: Comment Request; Real Estate Settlement Procedures Act (RESPA) Disclosures

AGENCY: Office of the Assistant Secretary for Housing-Federal Housing Commissioner, HUD.

ACTION: Notice.

SUMMARY: The proposed information collection requirement described below will be submitted to the Office of Management and Budget (OMB) for review, as required by the Paperwork Reduction Act. The Department is soliciting public comments on the subject proposal.

DATES: *Comments Due Date:* August 28, 2006.

ADDRESSES: Interested persons are invited to submit comments regarding this proposal. Comments should refer to the proposal by name and/or OMB Control Number and should be sent to: Lillian Deitzer, Reports Management Officer, Department of Housing and Urban Development, 451 7th Street, SW., L'Enfant Plaza Building, Room 8003, Washington, DC 20410 or *Lillian_Deitzer@hud.gov.*

FOR FURTHER INFORMATION CONTACT: Ivy Jackson, Director, Office of Interstate Land Sales and Real Estate Settlement Procedures Act, Department of Housing and Urban Development, 451 7th Street, SW., Washington, DC 20410, telephone (202) 708–0502 (this is not a toll free number) for copies of the proposed forms and other available information.

SUPPLEMENTARY INFORMATION: The Department is submitting the proposed information collection to OMB for review, as required by the Paperwork Reduction Act of 1995 (44 U.S.C. chapter 35, as amended).

This Notice is soliciting comments from members of the public and affected agencies concerning the proposed collection of information to: (1) Evaluate whether the proposed collection is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility; (2) Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information; (3) Enhance the quality, utility, and clarity of the information to be collected; and (4) Minimize the burden of the collection of information on those who are to respond; including the use of appropriate automated collection techniques or other forms of information technology, e.g., permitting electronic submission of responses.

This Notice also lists the following information:

Title of Proposal: Real Estate Settlement Procedures Act (RESPA) Disclosures.

OMB Control Number, if applicable: 2502–0265.

Description of the need for the information and proposed use: The Real Estate Settlement Procedures Act requires settlement service providers to give homebuyers certain disclosure information at or before settlement and pursuant to the servicing of the loan and escrow account. This includes a Special Information Booklet, a Good Faith Estimate, an Initial Servicing Disclosure, the Form HUD–1 or HUD–1A, and when applicable, an Initial Escrow Account Statement, an Annual Escrow Account Statement, an Escrow Account Disbursement Disclosure, an Affiliated Business Arrangement Disclosure, and a Servicing/Transfer Disclosure.

Agency form numbers, if applicable: HUD–1 and HUD–1A.

Estimation of the total numbers of hours needed to prepare the information collection including number of respondents, frequency of response, and hours of response: The total number of annual burden hours needed to prepare the information is 12,164,880; the number of respondents is estimated to be 20,000 generating approximately 162,596,000 responses annually; these are third party disclosures, the frequency of response is annually for one disclosure and as required for others; and the estimated time per response varies from 2 minutes to 15 minutes.

Status of the proposed information collection: Extension of a currently approved collection.

Authority: The Paperwork Reduction Act of 1995, 44 U.S.C., Chapter 35, as amended.

Dated: June 23, 2006.

Frank L. Davis,

General Deputy Assistant Secretary for Housing-Deputy Federal Housing Commissioner.

[FR Doc. 06–5780 Filed 6–28–06; 8:45 am]

BILLING CODE 4210–67–M

DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

[Docket No.FR–5044–N–12]

Notice of Submission of Proposed Information Collection to OMB: Contract for Inspection Services-Turnkey

AGENCY: Office of the Assistant Secretary for Public and Indian Housing, HUD.

ACTION: Notice.

SUMMARY: The proposed information collection requirement described below will be submitted to the Office of Management and Budget (OMB) for review, as required by the Paperwork Reduction Act. The Department is soliciting public comments on the subject proposal. Information is used by the PHA to obtain professional architectural services to assist in the administration of a construction contract and to inspect the installation of the work.

DATES: *Comments Due Date:* August 28, 2006.

ADDRESSES: Lillian Deitzer, Reports Management Officer, AYO, Department of Housing and Urban Development, 451 Seventh Street, Southwest, Washington, DC 20410; e-mail *Lillian_Deitzer@HUD.gov;* telephone (202) 708–2374. This is not a toll-free number. Copies of the proposed forms and other available documents submitted to OMB may be obtained from Mr. Deitzer.

FOR FURTHER INFORMATION CONTACT: Aneita Waites, (202) 708–0713, extension 4114, for copies of the proposed forms and other available documents. (This is not a toll-free number).

SUPPLEMENTARY INFORMATION: The Department has submitted the proposal for the collection of information, as described below, to OMB for review, as required by the Paperwork Reduction Act (44 U.S.C. Chapter 35). The Notice lists the following information: (1) The title of the information collection proposal; (2) the office of the agency to collect the information; (3) the OMB approval number, if applicable; (4) the description of the need for the information and its proposed use; (5) the agency form number, if applicable; (6) what members of the public will be affected by the proposal; (7) how frequently information submissions will be required; (8) an estimate of the total number of hours needed to prepare the information submission including number of respondents, frequency of response, and hours of response; (9) whether the proposal is new, an extension, reinstatement, or revision of an information collection requirement; and (10) the name and telephone number of an agency official familiar with the proposal and of the OMB Desk Officer for the Department.

This Notice also lists the following information:

Title of Proposal: Contract for Inspection Services-Turnkey.

OMB Approval Number: 2577–0007.

Form Numbers: HUD–5084.

Description of the Need for the Information and Its Proposed Use: Information is used by the PHA to obtain professional architectural services to assist in the administration of a construction contract and to inspect the installation of the work.

Respondents: Not-for-profit institutions, State, Local or Tribal Government.

Frequency of Submission: Other per applicant.

	Number of respondents	Annual responses	×	Hours per response	=	Burden hours
Reporting Burden	76	76		2.00		152

Total Estimated Burden Hours: 152.

Status: Extension of a currently approved collection.

Authority: Section 3507 of the Paperwork Reduction Act of 1995, 44 U.S.C. 35, as amended.

Dated: June 23, 2006.

Sherry Fobear-McCown,

Program Analyst.

[FR Doc. 06–5819 Filed 6–28–06; 8:45 am]

BILLING CODE 4210–67–P

DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

[Docket No. FR–4800–FA–24]

Announcement of Funding Award—FY 2003; Healthy Homes Demonstration Program

AGENCY: Office of the Secretary, Office of Healthy Homes and Lead Hazard Control, HUD.

ACTION: Announcement of funding awards.

SUMMARY: In accordance with section 102(a)(4)(C) of the Department of Housing and Urban Development Reform Act of 1989, this announcement notifies the public of a funding decision made by the Department in a competition for funding under the Healthy Homes Demonstration Program Notice of Funding Availability (NOFA). This announcement contains the name and address of the award recipients and the amounts of award.

FOR FURTHER INFORMATION CONTACT: Jonnette Hawkins, Department of Housing and Urban Development, Office of Healthy Homes and Lead Hazard Control, Room 8236, 451 Seventh Street, SW., Washington, DC, 20410, telephone (202) 755–1785, ext. 7593. Hearing- and speech-impaired persons may access the number above via TTY by calling the toll free Federal Information Relay Service at 1–800–877–8339.

SUPPLEMENTARY INFORMATION: The 2003 awards were announced in the HUD News Release on October 2, 2003. These awards were the result of a competition announced in a **Federal Register** notice published on April 25, 2003 (68 FR 21363) for the Healthy Homes Demonstration Program. The purpose of the competition was to award grant funding for grants and cooperative agreements under this program. Applications were scored and selected on the basis of selection criteria contained in that Notice.

In accordance with section 102(a)(4)(C) of the Department of Housing and Urban Development Reform Act of 1989 (103 Stat. 1987, 42 U.S.C. 3545), the Department is publishing the names, addresses, and amounts of these awards as follows:

A total of $5,916,355 was awarded to seven grantees for the Healthy Homes Demonstration Program: Cuyahoga County Board of Health, 1375 Euclid Avenue, 5th Floor, Cleveland, OH 44115, $950,000; Department of Health, County of Erie, 95 Franklin Street, Room 910, Buffalo, NY 14202, $950,000; Board of Mahoning County Commissioners, 21 West Boardman Street, Suite 300, Youngstown, OH 44503, $900,000; Neighborhood House, Inc., 905 Spruce Street, Seattle, WA 98104, $850,000; City of Minneapolis, 250 S. Fourth Street, Room 414, Minneapolis, MN 55415, $650,000; NY Indoor Environmental Quality Center, Inc., 505 Irving Avenue, Syracuse, NY 13210, $850,000; The Medical Foundation, NE

Asthma Regional Council, 95 Berkeley Street, Boston, MA 02116, $766,355.

Dated: June 12, 2006.

Warren Friedman,

Deputy Director, Office of Healthy Homes and Lead Hazard Control.

[FR Doc. E6–10224 Filed 6–28–06; 8:45 am]

BILLING CODE 4210–67–P

DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

[Docket No. FR–4914–N–08]

Mortgagee Review Board; Administrative Actions

AGENCY: Office of the Assistant Secretary for Housing-Federal Housing Commissioner, Department of Housing and Urban Development (HUD).

ACTION: Notice.

SUMMARY: In compliance with Section 202(c) of the National Housing Act, this notice advises of the cause and description of administrative actions taken by HUD's Mortgagee Review Board against HUD-approved mortgagees.

FOR FURTHER INFORMATION CONTACT: David E. Hintz, Secretary to the Mortgagee Review Board, 451 Seventh Street, Room B–133 Portals 200, SW., Washington, DC 20410–8000, telephone: (202) 708–3856, extension 3594. A Telecommunications Device for Hearing- and Speech-Impaired Individuals (TTY) is available at (800) 877–8339 (Federal Information Relay Service).

SUPPLEMENTARY INFORMATION: Section 202(c)(5) of the National Housing Act (added by Section 142 of the Department of Housing and Urban Development Reform Act of 1989, Pub. L. 101–235, approved December 15, 1989), requires that HUD ''publish a description of and the cause for administrative action against a HUD-approved mortgagee'' by the Department's Mortgagee Review Board (Board). In compliance with the requirements of Section 202(c)(5), this notice advises of administrative actions that have been taken by the Board from March 14, 2005 to May 16, 2006.

1. ABN Amro Mortgage Group, Inc., Ann Arbor, MI [Docket No. 04–4318–MR]

Action: Settlement Agreement signed December 30, 2005. Without admitting wrongdoing or fault, ABN Amro Mortgage Group, Inc. (ABN Amro) agreed to pay the United States of America the sum of $16,850,000. ABN Amro also agreed not to submit claims or cause claims to be submitted to HUD for any of the 783 mortgage loans covered in the Settlement Agreement.

Cause: The Board took this action based on a violation of HUD/FHA requirements in the origination of HUD/FHA-insured loans where ABN Amro made false certifications to HUD on 26,775 FHA-insured mortgages.

2. AMortgage Link, LLC, Memphis, TN [Docket No. 03–3170–MR]

Action: Settlement Agreement signed October 20, 2005. Without admitting liability or fault, AMortgage Link, LLC (AMortgage Link) agreed to pay HUD an administrative payment in the amount of $33,500.

Cause: The Board took this action based on the following violations of HUD/FHA requirements in the origination of HUD/FHA-insured loans where AMortgage Link: Failed to ensure that its employees worked exclusively for AMortgage Link; allowed prohibited payments to individuals who received other payments for services related to a loan transaction; failed to implement and maintain a Quality Control Plan in compliance with HUD/FHA requirements; submitted falsified and conflicting documentation to obtain FHA mortgage insurance; and failed to provide files that originating lenders are required to maintain.

3. Apreva, Inc., Bellevue, WA [Docket No. 06–6001–MR]

Action: Settlement Agreement signed March 3, 2006. Without admitting fault or liability, Apreva, Inc. (Apreva) and Apreva's President agreed: To an indefinite voluntary withdrawal of its FHA-approval until it has paid, or otherwise indemnified HUD for its losses on thirty-four mortgages; to pay HUD a civil money penalty in the amount of $316,000; that Apreva's President will not have a controlling interest (defined as 51% or greater) in any other FHA-approved mortgage company during the time Apreva's withdrawal is in effect; and if Apreva fails to make any civil money penalty payment under the Settlement Agreement that Apreva's President will personally guarantee such payment.

Cause: The Board took this action based on the following violations of HUD/FHA requirements in the origination of HUD/FHA-insured loans where Apreva: Failed to provide adequate compensating factors to justify the approval of mortgages with ratios exceeding HUD/FHA standards; failed to adequately document employment income in accordance with HUD/FHA requirements; failed to properly verify the source of funds used for the downpayment and/or closing costs; failed to evaluate credit history and/or explain negative credit information to ensure compliance with HUD/FHA credit requirements; approved mortgages without establishing that the interest rate buy-down will not have an adverse effect on the borrower's ability to make mortgage payments in accordance with HUD/FHA requirements; failed to adequately explain and/or resolve important file discrepancies or irregularities; failed to obtain the borrower's original signature on the Uniform Residential Mortgage Application; improperly allowed the inclusion of gift funds in its calculation of cash reserves; falsely certified that mortgages were eligible for HUD/FHA mortgage insurance; allowed non-exclusive employees to originate HUD/FHA-insured mortgages; and failed to implement and maintain a Quality Control Plan and review procedures in compliance with HUD/FHA requirements.

4. Budget Mortgage Bankers, Ltd., New Hyde Park, NY [Docket No. 05–5076–MR]

Action: Settlement Agreement signed March 6, 2006. Without admitting liability or fault, Budget Mortgage Bankers, Ltd. (Budget) agreed to indemnify HUD for any losses incurred on 15 HUD/FHA-insured loans and, pay HUD and administrative payment in the amount of $238,500.

Cause: The Board took this action based on the following violations of HUD/FHA requirements in the origination of HUD/FHA-insured loans where Budget: Approved more than one HUD/FHA-insured loan for borrowers without adequate justification; made false certifications on the HUD Form 92900–A, Part II, Lender Certification; failed to ensure that loan amounts did not exceed the maximum loan-to-value limits; failed to underwrite the loan in accordance with HUD/FHA requirements because it permitted the use of an appraiser not approved by the Department; failed to originate and underwrite streamline refinance loans in accordance with HUD/FHA requirements; failed to establish the source and/or adequacy of funds for the down payment and/or closing costs; failed to ensure borrowers met the minimum credit requirements; failed to provide and/or verify significant compensating factors for loans with back-end ratios that exceeded HUD/FHA standards; failed to properly verify and analyze the borrower's income and/or stability of employment; failed to ensure that verifications and other supporting documents did not pass

through the hands of an interested third party; failed to address discrepancies in documents used to originate HUD/FHA mortgages; failed to ensure all parties involved in the transaction were screened to determine their eligibility to participate in HUD/FHA's mortgage insurance program; failed to ensure that all required repairs for a property insured as a Section 203 (k) loan were completed before the loan was refinanced into a Section 203(b) loan; failed to ensure that relevant loan documents were fully executed; permitted an employee, who was also a party to the transaction, to be involved in processing the loan; and failed to implement and maintain a Quality Control Plan in conformance with HUD/FHA requirements.

5. Columbia Funding Group, Inc., Beaverton, OR [Docket No. 05–5078–MR]

Action: Settlement Agreement signed May 1, 2006. Without admitting liability or fault, Columbia Funding Group, Inc. (Columbia), agreed to pay HUD an administrative payment in the amount of $20,000.

Cause: The Board took this action based on the following violations of HUD/FHA requirements in the origination of HUD/FHA-insured loans where Columbia: Failed to ensure that HUD/FHA-insured loans were originated by employees of Columbia; falsely certified on the HUD/VA Addendum to the loan application that the information was obtained directly from the borrower by a fulltime employee or Columbia's duly authorized agent; failed to ensure that employees did not work at other companies in a related industry; allowed mortgagors to sign incomplete or blank documents; failed to retain complete origination files; failed to ensure that the person performing quality control reviews was not involved in origination functions; and failed to adopt and maintain a Quality Control Plan.

6. Discover Mortgage Company, Vancouver, WA [Docket No. 04–4947–MR]

Action: Settlement Agreement signed October 18, 2005. Without admitting liability or fault, Discover Mortgage Company (Discover) agreed to pay HUD an administrative payment in the amount of $70,000.

Cause: The Board took this action based on the following violations of HUD/FHA requirements in the origination of HUD/FHA-insured loans where Discover: F ailed to adopt and implement a Quality Control Plan in compliance with HUD/FHA requirements for years 2002 and 2003 (repeat finding); originated HUD/FHA-insured loans from branch offices with prohibited branch arrangements; and failed to retain complete loan origination files in accordance with HUD/FHA requirements.

7. First Florida State Mortgage Corporation, Melbourne, FL [Docket No. 05–5063–MR]

Action: Settlement Agreement signed March 10, 2006. Without admitting liability or fault, First Florida State Mortgage Corporation (First Florida) agreed to pay HUD an administrative payment in the amount of $8,500.

Cause: The Board took this action based on the following violations of HUD/FHA requirements in the origination of HUD/FHA-insured loans where First Florida: Failed to implement and maintain a Quality Control Plan in compliance with HUD/FHA requirements in the year 2004; violated HUD/FHA third party origination restrictions in six loans; made false certifications on the Uniform Residential Loan application and HUD/VA Addendum to the Uniform Residential Loan Application in six loans; and failed to ensure credit documents did not pass through the hands of interested third parties in two mortgages.

8. First Rate Capital Corporation, Melville, NY [Docket No. 05–5072–MR]

Action: Settlement Agreement signed March 21, 2006. Without admitting liability or fault, First Rate Capital Corporation (First Rate) agreed to indemnify HUD for any losses on three HUD/FHA-insured loans. First Rate also agreed to pay HUD an administrative payment in the amount of $109,500.

Cause: The Board took this action based on the following violations of HUD/FHA requirements in the origination of HUD/FHA-insured loans where First Rate: Used conflicting information to originate HUD/FHA insured loans; violated third party origination restrictions; permitted individuals who were not exclusive employees to originate HUD/FHA loans; signed and falsely certified on the HUD 92900–A, Part II, Lender Certification; failed to ensure that the borrowers met the statutory three percent minimum required investment in the property; failed to provide evidence that original verification documents were received and reviewed; failed to document the source and/or adequacy of funds for downpayment and/or closing costs; failed to properly analyze the borrower's credit history to ensure HUD's minimum credit requirements were met; failed to properly verify the borrower's income and/or stable employment history; failed to ensure that the HUD–1 Settlement Statement accurately reflect the loan transaction; failed to reconcile incongruities in appraisals or accepted incomplete appraisal reports; and failed to implement and maintain a Quality Control Plan in conformance with HUD requirement.

9. Flagstar Bank, FSB, Troy, MI [Docket No. 05–5031–MR]

Action: Settlement Agreement signed January 11, 2006. Without admitting wrongdoing, liability or fault, Flagstar Bank, FSB (Flagstar) agreed: To comply with all of the provisions of the Fair Housing Act; to resolve all outstanding issues raised in the Notice of Violation within thirty days of the effective date of the Settlement Agreement; and to pay HUD a civil money penalty in the amount of $182,000.

Cause: The Board took this action based on a violation of HUD/FHA requirements in the origination of HUD/FHA-insured loans where Flagstar violated the Fair Housing Act from May 1, 2001 to January 31, 2002 by charging non-minority borrowers higher fees than minority borrowers.

10. George Mason Mortgage, LLC, Fairfax, VA [Docket No. 05–5055–MR]

Action: Settlement Agreement signed December 1, 2005. Without admitting liability or fault, George Mason Mortgage, LLC (George Mason) agreed to pay HUD an administrative payment in the amount of $45,000. George Mason also agreed to indemnify HUD for any losses on one loan.

Cause: The Board took this action based on the following violations of HUD/FHA requirements in the origination of HUD/FHA-insured loans where George Mason: Failed to properly analyze the borrower's credit history to ensure minimum credit requirements were met and conflicting information was resolved, prior to originating HUD/FHA-insured loans; failed to adequately verify and document the source and/or adequacy of funds used for downpayment and/or closing costs; failed to provide evidence that original verification documents were received and reviewed; and failed to set up escrow accounts for the deposit of buy-down funds.

11. Greenwich Home Mortgage Corporation, Cedar Knolls, NJ [Docket No. 05–5077–MR]

Action: Settlement Agreement signed March 3, 2006. Without admitting liability or fault, Greenwich Home

Mortgage Corporation (Greenwich) agreed to: Pay HUD an administrative payment in the amount of $58,000; indemnify HUD for any losses on five loans; and refund borrowers excessive fees on 18 loans.

Cause: The Board took this action based on the following violations of HUD/FHA requirements in the origination of HUD/FHA-insured loans where Greenwich: Failed to ensure the borrower was eligible for HUD/FHA mortgage insurance, with respect to the intended use of the property and occupancy status; failed to establish the source and/or adequacy of funds for the downpayment and/or costs due at closing; failed to ensure borrowers met their minimum required cash investment; failed to provide significant compensating factors for loans approved with fixed payment to income ratios that exceeded HUD standards; failed to properly document the borrower's income and/or a stable two-year employment history; failed to maintain documentation that 203(k) required repairs were completed in a timely and satisfactory manner and escrowed funds were properly disbursed; charged borrowers fees in excess of the actual cost for services, without adequate justification; and the Quality Control Plan was missing a few compliance requirements.

12. Home Consultants, Inc., Lake Ariel, PA [Docket No. 04–4792–MR]

Action: Settlement Agreement signed March 9, 2006. Without admitting liability or fault, Home Consultants, Inc. (HCI) agreed to indemnity HUD for any losses on 12 loans; refund unallowable fees identified in 48 loans; and to pay $1,777.34 to buy-down one loan. Home also agreed to pay HUD an administrative payment in the amount of $81,500.

Cause: The Board took this action based on the following violations of HUD/FHA requirements in the origination of HUD/FHA-insured loans where HCI: used false and conflicting information to originate FHA loans; failed to establish the source and/or adequacy of funds used for down payment and/or closing costs; failed to properly analyze the borrower's credit history to ensure HUD's minimum credit requirements were met; failed to properly verify and/or document effective income; failed to ensure the loan closed in the same manner as it was underwritten and approved; failed to comply with HUD/FHA requirements concerning contingent liabilities; failed to ensure borrowers met the minimum required investment; failed to ensure that the documents used to approve the loans were not handled by an interested party to the transaction; charged borrowers fees that are specifically prohibited by HUD; failed to ensure the property met minimum property standards; failed to resolve discrepancies regarding ownership of properties before the loans were submitted to HUD and HCI accepted an incomplete Uniform Residential Appraisal Report that did not support the final value conclusion; and implemented a Quality Control Plan that did not contain all elements required by HUD.

13. Liberty Mortgage Brokers, Richmond Hill, NY [Docket No. 04–4370–MR]

Action: Settlement Agreement signed February 28, 2006. Without admitting liability or fault, Liberty Mortgage Brokers (Liberty) agreed to pay HUD an administrative payment in the amount of $10,000. Also, Liberty voluntarily surrendered its FHA approval effective August 19, 2005 and has agreed not to re-apply for FHA approval.

Cause: The Board took this action based on the following violations of HUD/FHA requirements in the origination of HUD/FHA-insured loans where Liberty: participated in a scheme with other lenders to violate HUD conflict of interest regulations; failed to file annual reports regarding loan application activity; failed to maintain complete loan files; and failed to implement and maintain an adequate Quality Control Plan in compliance with HUD/FHA requirements.

14. Mid-America Mortgage Corporation, Denver, CO [Docket No. 05–5052–MR]

Action: On March 14, 2005, the Board issued a letter to Mid-America Mortgage Corporation (Mid-America) suspending its FHA approval pending resolution of the Indictment against Mid-America's President.

Cause: The Board took this action because Mid-America's President/owner was indicted in United States District Court for conspiring with others to falsify information included in loan applications submitted to HUD for the purpose of obtaining mortgage loans with HUD/FHA mortgage insurance.

15. Moreland Financial Corporation, Fort Washington, PA [Docket No. 04–4433-MR]

Action: The Board voted to reject Moreland Financial Corporation's (Moreland) settlement offer of installment payments and insisted that Moreland pay $22,000 in administrative payments in one lump sum.

Cause: The Board took this action because Moreland failed to finalize a settlement previously considered by the Board.

16. Mortgage Access Corporation d/b/a Weichert Financial Services, Morris Plains, NJ [Docket No. 05–5044–MR]

Action: Settlement Agreement signed December 20, 2005. Mortgage Access Corporation (Mortgage Access) agreed to indemnify HUD for any losses incurred on nine loans. Mortgage Access also agreed to make an administrative payment to HUD in the amount of $53,500.

Caution: The Board took this action based on the following violations of HUD/FHA requirements in the origination of HUD/FHA-insured loans where Mortgage Access: failed to properly document the source and/or adequacy of funds used for the downpayment and closing costs; failed to properly document the amount of reserves used for loan approval; failed to properly document the borrower's employment, income or both; failed to ensure that verification and other supporting documents did not pass through the hands of an interested third party; failed to resolve discrepancies between the Uniform Residential Appraisal Report, the HUD–1 Settlement Statement, and the sales contract; failed to ensure that the loan amounts did not exceed the maximum loan-to-value limits; charged borrowers unallowable fees; failed to implement and maintain a Quality Control Plan in conformance with HUD/FHA requirements; and failed to retain complete loan origination files for review and to comply with HUD's requests for documentation.

17. U.S. Mortgage Finance Corporation, Timonium, MD [Docket No. 04–4227–MR]

Action: Settlement Agreement signed March 21, 2006. Without admitting liability or fault, U.S. Mortgage Finance Corporation (USMFC) agreed to pay HUD an administrative payment in the amount of $72,000. USMFC also agreed to indemnify HUD for any losses incurred on five loans.

Cause: The Board took this action based on the following violations of HUD/FHA requirements in the origination of HUD/FHA-insured loans where USMFC: allowed its employee to work for another entity while employed by USMFC; employed an ineligible loan officer (a debarred individual) in violation of HUD/FHA approval standards; falsely stated on the Uniform Residential Loan Application (URLA) that the applications were taken by face-

to-face interviews by an employee, and falsely certified on the Addendum to the URLA; used falsified documentation and/or conflicting information in originating loans and obtaining HUD/FHA mortgage insurance; failed to follow HUD-required procedures in calculating maximum mortgage amounts, thereby insuring HUD/FHA loans that exceed HUD limits; failed to follow HUD-required procedures in cases where a non-profit agency was providing the down payment assistance in the form of a gift; and failed to adequately verify the amount and stability of effective income.

Dated: June 16, 2006.

Brian D. Montgomery

Assistant Secretary for Housing Federal Housing Commissioner.

[FR Doc. E6–10225 Filed 6–28–06; 8:45 am]

BILLING CODE 4210–67–P

DEPARTMENT OF THE INTERIOR

Bureau of Indian Affairs

Draft Environmental Impact Statement for the Mandan, Hidatsa, Arikara (MHA) Nation's Proposed Clean Fuels Refinery, Fort Berthold Indian Reservation, Ward County, ND

AGENCY: Bureau of Indian Affairs, Interior.

ACTION: Notice.

SUMMARY: This notice advises the public that the Bureau of Indian Affairs (BIA) as lead agency, with the U.S. Environmental Protection Agency (EPA) as co-lead agency, and the Mandan, Hidatsa and Arikara (MHA) Nation and the U.S. Army Corps of Engineers as cooperating agencies, intends to file a Draft Environmental Impact Statement (DEIS) with the EPA for the proposed Clean Fuels Refinery, and that the DEIS is now available for public review. The proposed federal actions are: (1) The taking into trust of 469 acres of fee land by the BIA in support of the MHA Nation's proposal to construct and operate a clean fuels refinery and produce buffalo forage; and (2) the issuance by the EPA of a Clean Water Act, Draft National Pollutant Discharge Elimination System Discharge (NPDES) permit for the discharge of treated wastewater from the proposed refinery. This notice also advises the public of the availability of the Draft NPDES permit (#ND–0030988) for review, and announces public hearings on the DEIS and Draft NPDES permit.

DATES: Written comments on the DEIS and/or Draft NPDES permit must arrive by August 29, 2006. The public hearings will be held July 31 through August 4, 2006, from 7 p.m. to 9 p.m., and August 5, 2006 (two meetings), from 10 a.m. to 2 p.m. and from 2 p.m. to 4 p.m. No hearing will close, however, before all those who wish to make statements have been heard.

ADDRESSES: You may mail, hand carry, or telefax written comments on the DEIS to William Benjamin, Regional Director, Great Plains Region, Attn: Diane Mann-Klager MC 301, Bureau of Indian Affairs, 115 4th Avenue SE, Aberdeen, South Dakota 57401, Telefax: 605–226–7358.

You may mail, hand carry, or telefax written comments on the Draft NPDES permit to Bruce Kent, U.S. Environmental Protection Agency, Region 8 (8P–W–P), 999 18th St., Suite 300, Denver, Colorado 80202–2466, Telefax: 303–312–7984.

The addresses for the public hearings are as follows:

July 31, 2006: Twin Buttes Segment Office, 79 E. Avenue, NW, Halliday, ND.

August 1, 2006: Ralph Well, Jr. Memorial Complex, 1620 61st Avenue, NW, Roseglen, ND.

August 2, 2006: Parshall Veterans Memorial Community Building, 315 2nd St. SE, Parshall, ND.

August 3, 2006: Mandaree Community Center, 4th Avenue, NE, 404 Ridge Road, Mandaree, ND.

August 4, 2006: Four Bears Casino, 202 Frontage Road, New Town, ND.

August 5, 2006 (10 a.m.): New Town North Segment Community Building, 710 East Avenue, New Town, ND.

August 5, 2006 (2 p.m.): Makoti Pioneer Senior Citizen's Center, 240 Main Street, Makoti, ND.

The DEIS and Draft NPDES permit are available for public review at the following locations:

- Bureau of Indian Affairs, Great Plains Regional Office, 115 4th Avenue, SE, Aberdeen, SD.
- Bureau of Indian Affairs, Fort Berthold Agency. 202 Main Street, New Town, ND.
- EPA Region 8 Library, 999 18th Street, 1st Floor, Denver Place Building, Denver, CO.
- Three Affiliated Tribes, Legal Department, 404 Frontage Road, New Town, ND.
- Twin Buttes Segment Office, 79 E. Avenue, NW., Halliday, ND.
- White Shield Segment Office, 1620 61st Avenue, NW., Roseglen, ND.
- Parshall Segment Office, 315 2nd Street, SE., Parshall, ND.
- Mandaree Segment Office, 4th Avenue, NE, 404 Ridge Road, Mandaree, ND.
- Four Bears Segment Office, 404 Frontage Road, New Town, ND.
- North Segment Office, 710 East Avenue, New Town, ND.
- Three Affiliated Tribes, Office of the Secretary, 404 Frontage Road, New Town, ND.

The DEIS and Draft NPDES permit are also available on the following Web sites: *http://www.epa.gov/region8/compliance/nepa and http://www.MHANation.com.*

If you would like to obtain a copy of the DEIS and/or Draft NPDES permit, please write to Diane Mann-Klager at the address provided above for the BIA Great Plains Regional Office, or to Monica Morales, EPA Region 8, 999 18th Street, Suite 300, Denver, CO 80202–2466, or call the corresponding numbers provided below. Copies of the NPDES permit application as well as an accompanying Fact Sheet are also available upon request at the above EPA address. The administrative record for the NPDES permit, which includes data submitted by the applicant, is located at, and available upon request from this same EPA address.

FOR FURTHER INFORMATION CONTACT: Requests for information on the DEIS should be directed to Diane Mann-Klager, 605–226–7621 or Monica Morales, 303–312–6936 or 800–227–8917. You may request information on the Draft NPDES permits from Bruce Kent, 303–312–6133.

SUPPLEMENTARY INFORMATION: On February 5, 2003, the Three Affiliated Tribes Business Council, representing the MHA Nation, voted to purchase three tracts of land in the northeast corner of the Fort Berthold Indian Reservation. These tracts are located along Highway 23, four miles west of the town of Makoti in Ward County, North Dakota. The tracts include the NW ¼ of Section 20, Township 152 North, Range 87 West (Tract 1); the North ½ of Section 19, Township 152 North, Range 87 West (Tract 2); and Outlot 1 in the NE ¼ of Section 19, Township 152 North, Range 87 West (Tract 3). Taken together as a single parcel, these tracts encompass almost 469 acres. Following the purchase, the MHA Nation requested that the Department of the Interior, BIA, accept the tracts into trust status. The Indian Reorganization Act of 1935 authorizes the Secretary of the Interior to hold land for Indian Tribes and individual Indians in trust.

The MHA Nation proposes to use the 469 acres for two purposes. First, it would construct, own, operate, and maintain a clean fuels refinery on 190 acres of the 469-acre parcel. Second, it would grow forage for buffalo on the

other acres, in order to reduce the costs of purchasing feed from other sources. This project is needed for the MHA Nation to pursue an economic development opportunity to benefit its members, in keeping with its tribal sovereignty.

Feedstock for the proposed refinery would include 10,000 barrels per stream day (BPSD) of synthetic crude oil via existing pipeline from Alberta, Canada; 3,000 BPSD of field butane from local suppliers; 6 million standard cubic feet per day of natural gas via existing pipeline; and 300 barrels of bio-diesel or 8,500 bushels per day of soybeans. From the feedstock, the refinery would produce about 5,750 BPSD of diesel fuel, 6,770 BPSD of gasoline, and 300 BPSD of propane. With the planned maintenance program, the refinery would have an economic life well past 20 years. At the end of its economic life, MHA Nation would decommission and reclaim the facility.

The proposed refinery would include atmospheric distillation, hydrotreating, and hydrocracking processing units for the synthetic crude, a hydrogen plant utilizing natural gas, and butane processing units. Other areas of the proposed refinery include rail and truck loading and unloading facilities, a tank farm, blending facilities, office and maintenance buildings and a fire suppression system. Potentially contaminated (oily) storm water will be managed separately from uncontaminated (non-oily) storm water.

The applicant proposes to discharge effluent from four discharge points (outfalls) into a wetland located in the NW ¼ of Section 19, Township 152N, Range 87W. The wetland is a tributary of the East Fork of Shell Creek, which is a tributary to the Missouri River. The responsible official for the proposed permit application is, Tex G. Hall, Chairman, Three Affiliated Tribes Business Council, 404 Frontage Road, New Town, North Dakota 58763.

The DEIS describes, in detail, and analyzes the impacts of five alternatives for the BIA's action. These alternatives are as follows:

(1) Accept lands into trust in support of the MHA Nation's proposal to construct and operate a clean fuels refinery and produce buffalo forage;

(2) Accept lands into trust without construction or operation of a clean fuels refinery;

(3) Decline acceptance of lands into trust, but construction or operation of a clean fuels refinery may proceed;

(4) Accept lands into trust in support of the MHA Nation's proposal to construct and operate a clean fuels refinery with modification to the original design; and

(5) No action.

The DEIS also describes five effluent discharge alternatives for EPA's action. These alternatives are as follows:

(1) Issuance of an NPDES permit for effluent discharge of treated wastewater;

(2) No issuance of an NPDES permit, but disposal of treated wastewater through irrigation and effluent storage during the winter and wet weather;

(3) Issuance of an NPDES permit for partial effluent discharge from the facility and some storage and irrigation;

(4) No issuance of an NPDES permit, but effluent discharge to an Underground Injection Control Class I well; and

(5) No action.

Any person may submit comments on the DEIS and/or Draft NPDES permit in writing to the address provided in the **ADDRESSES** section, or either orally and/or in writing at one or more of the public hearings. A Presiding Officer will be present at each of the hearings and a written transcript of the hearings will be made a part of the administrative record for the agency decisions. The hearings will be recorded so that if anyone testifies in their native language, it can be interpreted and transcribed for inclusion in the administrative record.

Please make comments as specific as possible, with reference to chapters, page numbers and paragraphs in the DEIS document and Draft NPDES permit. While all comments will be considered, the most useful comments will contain new technical or scientific information, identify data gaps in the impact analysis, or provide technical or scientific rationale for opinions or preferences.

Public Comment Availability

Comments, including names and addresses of respondents, will be available for public review at the BIA and EPA Regional Office addresses shown in the **ADDRESSES** section, during business hours, 8 a.m. to 4:30 p.m., Monday through Friday, except holidays. Individual respondents may request confidentiality. If you wish us to withhold your name and/or address from public review or from disclosure under the Freedom of Information Act, you must state this prominently at the beginning of your written comment. Such requests will be honored to the extent allowed by the law. We will not, however, consider anonymous comments. All submissions from organizations or businesses, and from individuals identifying themselves as representatives or officials of organizations or businesses, will be made available for public inspection in their entirety.

Authority

This notice is published in accordance with section 1503.1 of the Council on Environmental Quality Regulations (40 CFR Parts 1500 through 1508) implementing the procedural requirements of the National Environmental Policy Act of 1969, as amended (42 U.S.C. 4321 *et seq.*), and the Department of the Interior Manual (516 DM 1–6), and is in the exercise of authority delegated to the Principal Deputy Assistant Secretary—Indian Affairs by 209 DM 8.

Dated: April 7, 2006.

Michael D. Olsen,

Acting Principal Deputy Assistant Secretary—Indian Affairs.

[FR Doc. 06–5818 Filed 6–28–06; 8:45 am]

BILLING CODE 4310–W7–P

DEPARTMENT OF THE INTERIOR

Bureau of Indian Affairs

Final Environmental Impact Statement for the Nottawaseppi Huron Band of Potawatomi Indians' Proposed 79 Acre Fee-to-Trust Transfer and Casino Project in Emmett Township, Calhoun County, MI

AGENCY: Bureau of Indian Affairs, Interior.

ACTION: Notice.

SUMMARY: This notice advises the public that the Bureau of Indian Affairs (BIA) intends to file a Final Environmental Impact Statement (FEIS) with the U.S. Environmental Protection Agency for the proposed 79 acre fee-to-trust land transfer and casino project in Emmett Township, Calhoun County, Michigan, and that the FEIS is now available to the public. The purpose of the proposed action is to help provide for the economic development of the Nottawaseppi Huron Band of Potawatomi Indians (Tribe).

DATES: The Record of Decision on the proposed action will be issued on or after July 31, 2006. Any comments on the FEIS must arrive by July 31, 2006.

ADDRESSES: You may mail or hand carry written comments to Terrance L. Virden, Director, Midwest Region, Bureau of Indian Affairs, Bishop Henry Whipple Federal Building, One Federal Drive, Room 550, Ft. Snelling, Minnesota 55111. Please include your name, return address and the caption, ''FEIS Comments, Nottawaseppi Huron Band of Potawatomi Indians' Proposed 79 Acre Fee-to-Trust and Casino Project,

Emmett Township, Calhoun County, Michigan,'' on the first page of your written comments.

Copies of the FEIS will be available for review at: (1) Willard Library, 7 West Van Buren, Battle Creek, Michigan 49017, Telephone (269) 968–8166; (2) Helen Warner Branch Library, 36 Minges Creek Place, Battle Creek, Michigan 49015, Telephone (269) 968–8166, extension 600; and (3) Marshall District Library, 124 West Green Street, Marshall, Michigan 49068, Telephone (269) 781–7821.

If you would like to obtain a copy of the FEIS, please write or call Herb Nelson, Regional Environmental Scientist, Midwest Region, Bureau of Indian Affairs, Bishop Henry Whipple Federal Building, One Federal Drive, Room 550, Ft. Snelling, Minnesota 55111, telephone (612) 725–4510, fax (612) 713–4401. The FEIS is also available on line at *http://www.HuronFEIS.com.*

FOR FURTHER INFORMATION CONTACT: Herb Nelson, (612) 725–4510.

SUPPLEMENTARY INFORMATION: The Tribe has asked the BIA to take 79 acres of land into trust on behalf of the Tribe, on which the Tribe proposes to build a casino. The property is located along the south side of Interstate 94 (I–94) in Emmett Township, Calhoun County, Michigan, at the Eleven Mile Road exit. The gaming facility would be managed by Gaming Enterprises Michigan (GEM) on behalf of the Tribe, pursuant to the terms of the gaming management agreement between the Tribe and GEM. The NIGC is responsible for the review and approval of the gaming management contract.

The project design includes an approximately 136,000 square foot casino, designed to accommodate 2000 slot machines and 50 gaming tables. The site is also proposed to include parking for approximately 3600 cars for patrons and gaming facility employees, plus 20 visitor spaces for busses and other over-sized vehicles. The parking area would cover approximately 32 acres.

Alternatives to the proposed project that are considered and evaluated in detail in the FEIS are as follows: (1) Trust acquisition and casino construction and operation (the proposed action); (2) trust acquisition and construction and operation of a casino smaller than the casino described in the proposed action; (3) trust acquisition and construction and operation of a casino with reduced hours of operation; (4) trust acquisition and construction and operation of a casino at an alternate location from that in the proposed action; and (5) no action. Alternatives considered and properly eliminated from detailed study in the FEIS include non-casino alternatives and the construction and operation of a larger casino than that described in the proposed action.

Environmental issues addressed in the FEIS include land and water resources, air quality, biological resources, cultural resources, socioeconomic conditions, resource use patterns, traffic and transportation networks, sound and noise, hazardous materials, public health and safety, public services, environmental justice, aesthetic resources and lighting, indirect and induced growth impacts, cumulative impacts and mitigation.

The BIA held a public scoping meeting July 28, 2004, in Battle Creek, Michigan, to identify issues and alternatives to be considered in the EIS. The BIA held a public hearing on the Draft Environmental Impact Statement August 24, 2005, in Battle Creek, Michigan.

Public Comment Availability

Comments, including names and addresses of respondents, will be available for public review at the BIA address shown in the **ADDRESSES** section, during business hours, 8 a.m. to 4:30 p.m., Monday through Friday, except holidays. Individual respondents may request confidentiality. If you wish us to withhold your name and/or address from public review or from disclosure under the Freedom of Information Act, you must state this prominently at the beginning of your written comment. Such requests will be honored to the extent allowed by the law. We will not, however, consider anonymous comments. All submissions from organizations or businesses, and from individuals identifying themselves as representatives or officials of organizations or businesses, will be made available for public inspection in their entirety.

Authority

This notice is published in accordance with section 1503.1 of the Council on Environmental Quality Regulations (40 CFR Parts 1500 through 1508) implementing the procedural requirements of the National Environmental Policy Act of 1969, as amended (42 U.S.C. 4321 *et seq.*), and the Department of the Interior Manual (516 DM 1–6), and is in the exercise of authority delegated to the Principal Deputy Assistant Secretary—Indian Affairs by 209 DM 8.

Dated: March 6, 2006.

Michael D. Olsen,

Acting Principal Deputy Assistant Secretary—Indian Affairs.

[FR Doc. 06–5817 Filed 6–28–06; 8:45 am]

BILLING CODE 4310–W7–P

DEPARTMENT OF THE INTERIOR

Bureau of Reclamation

Central Valley Project Improvement Act, Water Management Plans

AGENCY: Bureau of Reclamation, Interior.

ACTION: Notice of Availability.

SUMMARY: The following Water Management Plans are available for review:

- City of Vacaville.
- Santa Ynez River Conservation District.
- Sacramento County Water Agency.
- Grasslands Water District Refuge.
- El Dorado Irrigation District.
- City of Redding.

To meet the requirements of the Central Valley Project Improvement Act of 1992 (CVPIA) and the Reclamation Reform Act of 1982, the Bureau of Reclamation has developed and published the Criteria for Evaluating Water Management Plans (Criteria). Note: For the purpose of this announcement, Water Management Plans (Plans) are considered the same as Water Conservation Plans. The above districts have developed Plans, which Reclamation has evaluated and preliminarily determined to meet the requirements of these Criteria. Reclamation is publishing this notice in order to allow the public to review the Plans and comment on the preliminary determinations. Public comment on Reclamation's preliminary (*i.e.*, draft) determination is invited at this time.

DATES: All public comments must be received by July 31, 2006.

ADDRESSES: Please mail comments to Bryce White, Bureau of Reclamation, 2800 Cottage Way MP–410, Sacramento, California 95825, or contact at 916–978–5208 (TDD 978–5608), or e-mail *bwhite@mp.usbr.gov*.

FOR FURTHER INFORMATION CONTACT: To be placed on a mailing list for any subsequent information, please contact Mr. White at the e-mail address or telephone number above.

SUPPLEMENTARY INFORMATION: We are inviting the public to comment on our preliminary (*i.e.*, draft) determination of Plan adequacy. Section 3405(e) of the CVPIA (Title 34 Pub. L. 102–575) requires the Secretary of the Interior to

establish and administer an office on Central Valley Project water conservation best management practices (BMPs) that shall * * * develop criteria for evaluating the adequacy of all water conservation plans developed by project contractors, including those plans required by section 210 of the Reclamation Reform Act of 1982.'' Also, according to section 3405(e)(1), these Criteria must be developed ''* * * with the purpose of promoting the highest level of water use efficiency reasonably achievable by project contractors using best available cost-effective technology and best management practices.'' These Criteria state that all parties (Contractors) that contract with Reclamation for water supplies (municipal and industrial contracts over 2,000 acre-feet and agricultural contracts over 2,000 irrigable acres) must prepare Plans that contain the following information:

1. Description of the District.
2. Inventory of Water Resources.
3. BMPs for Agricultural Contractors.
4. BMPs for Urban Contractors.
5. BMP Plan Implementation.
6. BMP Exemption Justification.

Reclamation will evaluate Plans based on these Criteria. A copy of these Plans will be available for review at Reclamation's Mid-Pacific (MP) Regional Office located in Sacramento, California, and the local area office.

Our practice is to make comments, including names and home addresses of respondents, available for public review. Individual respondents may request that Reclamation withhold their home address from public disclosure, and we will honor such request to the extent allowable by law. There also may be circumstances in which Reclamation would elect to withhold a respondent's identity from public disclosure, as allowable by law. If you wish us to withhold your name and/or address, you must state this prominently at the beginning of your comments. We will make all submissions from organizations, businesses, and from individuals identifying themselves as representatives or officials of organizations or businesses available for public disclosure in their entirety. If you wish to review a copy of these Plans, please contact Mr. White to find the office nearest you.

Dated: June 5, 2006.

Donna E. Tegelman,

Regional Resources Manager, Mid-Pacific Region.

[FR Doc. E6–10262 Filed 6–28–06; 8:45 am]

BILLING CODE 4310–MN–P

INTERNATIONAL TRADE COMMISSION

[Inv. No. 337–TA–566]

In the Matter of Certain Chemical Mechanical Planarization Slurries and Precurors to Same Notice of a Commission Determination Not to Review an Initial Determination Terminating the Investigation with Respect to the Only Respondent, and Issuance of Consent Order

AGENCY: International Trade Commission.

ACTION: Notice.

SUMMARY: Notice is hereby given that the U.S. International Trade Commission has determined not to review an initial determination (''ID'') of the presiding administrative law judge (''ALJ'') in the above-captioned investigation terminating the investigation as to the only respondent. The investigation was terminated as to the only respondent based on a consent order.

FOR FURTHER INFORMATION CONTACT: Clint Gerdine, Esq., telephone 202–708–2310, Office of the General Counsel, U.S. International Trade Commission, 500 E Street, SW., Washington, DC 20436. Copies of all nonconfidential documents filed in connection with this investigation are or will be available for inspection during official business hours (8:45 a.m. to 5:15 p.m.) in the Office of the Secretary, U.S. International Trade Commission, 500 E Street SW., Washington, DC 20436, telephone 202–205–2000. General information concerning the Commission may also be obtained by accessing its Internet server (*http://www.usitc.gov*). The public record for this investigation may be viewed on the Commission's electronic docket (EDIS–ON–LINE) at *http://edis.usitc.gov.* Hearing-impaired persons are advised that information on the matter can be obtained by contacting the Commission's TDD terminal on 202–205–1810.

SUPPLEMENTARY INFORMATION: The Commission instituted this investigation on April 28, 2006, based on a complaint filed by Cabot Microelectronics Corporation of Aurora, Illinois. A supplement to the complaint was filed on April 13, 2006. The complaint alleges violations of section 337 in the importation into the United States, the sale for importation, and the sale within the United States after importation of certain chemical mechanical planarization slurries and precursors to same by reason of infringement of claims 20, 22, 38, and 48 of U.S. Patent No. 5,958,288; claims 11, 18–19, and 25 of the U.S. Patent No. 5,980,773; and claims 8, 12, and 17 of U.S. Patent No. 6,068,787. The complaint named the respondent as Cheil Industries Inc. of Korea. The complaint further alleged that an industry in the United States exists as required by subsection (a)(2) of section 337.

On May 19, 2006, the only respondent filed a motion for termination of the investigation on the basis of a consent order. The Commission investigative attorney filed a response in support of the motion on May 31, 2006.

The ALJ issued the subject ID on June 7, 2006, granting the motion for termination. No party petitioned for review of the ID pursuant to 19 CFR 210.43(a), and the Commission found no basis for ordering a review on its own initiative pursuant to 19 CFR 210.44.

The authority for the Commission's determination is contained in section 337 of the Tariff Act of 1930, as amended (19 U.S.C. 1337), and in sections 210.21(c) and 210.42(h) of the Commission's Rules of Practice and Procedure.

Issued: June 23, 2006.

By order of the Commission.

Marilyn R. Abbott,

Secretary to the Commission.

[FR Doc. E6–10218 Filed 6–28–06; 8:45 am]

BILLING CODE 7020–02–P

INTERNATIONAL TRADE COMMISSION

[Inv. No. 337–TA–561]

In the Matter of Certain Combination Motor and Transmission Systems and Devices Used Therein, and Products Containing Same; Notice of a Commission Determination Not to Review an Initial Determination Granting a Motion to Amend the Complaint and Notice of Investigation

AGENCY: U.S. International Trade Commission.

ACTION: Notice.

SUMMARY: Notice is hereby given that the U.S. International Trade Commission has determined not to review the presiding administrative law judge's (''ALJ'') initial determination (''ID'') granting complainant's motion to amend the complaint and notice of investigation in the above-captioned investigation to substitute respondent Toyota Motor Manufacturing North America, Inc. with Toyota Motor Engineering & Manufacturing North America, Inc. and Toyota Motor Manufacturing Kentucky, Inc.

FOR FURTHER INFORMATION CONTACT: Timothy P. Monaghan, Esq., Office of the General Counsel, U.S. International Trade Commission, 500 E Street, SW., Washington, DC 20436, telephone 202–205–3152. Copies of the nonconfidential version of the ID and all nonconfidential documents filed in connection with this investigation are or will be available for inspection during official business hours (8:45 a.m. to 5:15 p.m.) in the Office of the Secretary, U.S. International Trade Commission, 500 E Street, SW., Washington, DC 20436, telephone 202–205–2000. Hearing-impaired persons are advised that information on this matter can be obtained by contacting the Commission's TDD terminal on 202–205–1810. General information concerning the Commission may also be obtained by accessing its Internet server (*http://www.usitc.gov*). The public record for this investigation may be viewed on the Commission's electronic docket (EDIS) at *http://edis.usitc.gov.*

SUPPLEMENTARY INFORMATION: On February 13, 2006, the Commission instituted an investigation under section 337 of the Tariff Act of 1930, 19 U.S.C. 1337, based on a complaint filed by Solomon Technologies, Inc., of Tarpon Springs, Florida (''Solomon''), alleging a violation of section 337 in the importation, sale for importation, and sale within the United States after importation of certain combination motor and transmission systems and devices used therein, and products containing same by reason of infringement of claims 1–5, 7, 8, 10, and 12 of U.S. Patent No. 5,067,932. 71 FR 7574. The notice of investigation named Toyota Motor Corporation, of Japan; Toyota Motor Manufacturing North America, Inc., of Erlanger, Kentucky; and Toyota Motor Sales, U.S.A., Inc., of Torrance, California as respondents.

On May 23, 2006, complainant Solomon moved for leave to amend the complaint and notice of investigation pursuant to Commission rule 210.14(b) to substitute respondent Toyota Motor Manufacturing North America, Inc. with Toyota Motor Engineering & Manufacturing North America, Inc. and Toyota Motor Manufacturing Kentucky, Inc. Respondents and the Commission investigative attorney did not oppose the motion.

On May 26, 2006, the ALJ issued an ID (Order No. 7) granting complainant's unopposed motion to amend the complaint and notice of investigation. No petitions for review of Order No. 7 were filed.

The authority for the Commission's action is contained in section 337 of the Tariff Act of 1930, as amended (19 U.S.C. 1337) and in section 210.42 of the Commission's Rules of Practice and Procedure (19 CFR 210.42).

Issued: June 26, 2006.

By order of the Commission.

Marilyn R. Abbott,

Secretary to the Commission.

[FR Doc. 06–5812 Filed 6–28–06; 8:45 am]

BILLING CODE 7020–02–P

INTERNATIONAL TRADE COMMISSION

[Inv. No. 337–TA–491; Inv. No. 337–TA–481 (consolidated); Enforcement Proceeding]

In the Matter of Certain Display Controllers and Products Containing Same and Certain Display Controllers With Upscaling Functionality and Products Containing Same; Notice of Institution of Formal Enforcement Proceeding

AGENCY: U.S. International Trade Commission.

ACTION: Notice.

SUMMARY: Notice is hereby given that the U.S. International Trade Commission has instituted a formal enforcement proceeding relating to a limited exclusion order issued at the conclusion of the above-captioned investigation.

FOR FURTHER INFORMATION CONTACT: Michael Liberman, Esq., Office of the General Counsel, U.S. International Trade Commission, 500 E Street, SW., Washington, DC 20436, telephone (202) 205–3061. Copies of all nonconfidential documents filed in connection with this investigation are or will be available for inspection during official business hours (8:45 a.m. to 5:15 p.m.) in the Office of the Secretary, U.S. International Trade Commission, 500 E Street, SW., Washington, DC 20436, telephone 202–205–2000. General information concerning the Commission may also be obtained by accessing its Internet server (*http://www.usitc.gov*). The public record for this investigation may be viewed on the Commission's electronic docket (EDIS) at *http://edis.usitc.gov/*. Hearing-impaired persons are advised that information on the matter can be obtained by contacting the Commission's TDD terminal on 202–205–1810.

SUPPLEMENTARY INFORMATION: The Commission instituted Inv. No. 337–TA–481, *Certain Display Controllers with Upscaling Functionality and Products Containing Same* (''Display Controllers I'' or ''481 investigation'') on October 18, 2002, based on a complaint filed by Genesis Microchip (Delaware) Inc. (''Genesis'') of Alviso, California naming Media Reality Technologies, Inc. of Sunnyvale, California (''MRT''); Trumpion Microelectronics, Inc. (''Trumpion'') of Taipei City, Taiwan; and SmartASIC, Inc. of San Jose, California (''SmartASIC'') as respondents. 67 FR 64411. The complaint, as supplemented, alleged violations of section 337 of the Tariff Act of 1930 in the importation into the United States, sale for importation, and sale within the United States after importation of certain display controllers with upscaling functionality and products containing same by reason of infringement of certain claims of U.S. Patent No. 5,739,867 (''the '867 patent''). Id. On January 14, 2003, the then presiding administrative law judge (''ALJ'') issued an initial determination (''ID'') terminating respondent SmartASIC from the investigation on the basis of a settlement agreement. That ID was not reviewed by the Commission.

The final ID in *Display Controllers I* (''the 481 Final ID'') issued on October 20, 2003. 68 FR 69719 (Dec. 15, 2003). On December 5, 2003, the Commission determined to review the 481 Final ID in part. Id. On review of the 481 Final ID, the Commission determined to reverse portions of the ALJ's claim construction and to remand *Display Controllers I* to the ALJ. 69 FR 3602 (Jan. 26, 2004).

The Commission instituted Inv. No. 337–TA–491, *Certain Display Controllers and Products Containing Same* (''Display Controllers II'' or ''491 investigation'') on April 14, 2003, based on a complaint filed on behalf of Genesis. 68 FR 17964 (Apr. 14, 2003). The complaint, as supplemented, alleged violations of section 337 of the Tariff Act of 1930 in the importation into the United States, sale for importation, and sale within the United States after importation of certain display controllers and products containing same by reason of infringement of certain claims of U.S. Patent No. 6,078,361; certain claims of U.S. Patent No. 5,953,074 (''the '074 patent''); and certain claims of U.S. Patent No. 6,177,922 (''the '922 patent''). The notice of investigation named three respondents: Media Reality Technologies, Inc. of Taipei, Taiwan; MRT; and Trumpion. *Id.* Both Trumpion and MRT were also named respondents in *Display Controllers I.*

On June 20, 2003, the ALJ issued an ID (Order No. 5) amending the complaint and notice of investigation in *Display Controllers II* to add MStar Semiconductor, Inc. (''MStar'') as a respondent, additional claims of the

'074 patent, and certain claims of the '867 patent, which was asserted in the 481 investigation. That ID was not reviewed by the Commission. 68 FR 44967 (July 31, 2003).

On November 10, 2003, the ALJ issued an ID (Order No. 38) granting complainant's motion to terminate the *Display Controllers II* investigation with respect to Trumpion. In the same ID the ALJ terminated the investigation with respect to the '922 patent and the '074 patent. That ID was not reviewed by the Commission.

On April 14, 2004, the ALJ issued his final ID (''the 491 Final ID'') and recommended determination on remedy and bonding in *Display Controllers II*. The ALJ found a violation of section 337 in the 491 Final ID with respect to respondent MStar, but no violation with respect to respondent MRT.

On May 20, 2004, the ALJ issued an ID on remand in *Display Controllers I* (''the 481 Remand ID''). The ALJ found a violation of section 337 in the 481 Remand ID with respect to both respondents in *Display Controllers I*, MRT and Trumpion.

On May 21, 2004, the Commission issued an order consolidating the 481 and 491 investigations. On July 6, 2004, the Commission determined to review portions of the 481 Remand ID and portions of the 491 Final ID. 69 FR 41846.

On August 20, 2004, the Commission issued a limited exclusion order in which the Commission determined that there was a violation of Section 337 in the unlawful importation and sale by respondents MRT, Trumpion, and MStar of display controllers and products containing same by reason of infringement of, inter alia, claims 2, 33–35, and 36 of the '867 patent. On August 27, 2004, the Commission issued its Opinion (''the 481/491 Opinion,'' or ''Consolidated Opinion'') in which it explained the basis for its determination. MStar appealed the Commission's determination on violation relating to the '867 patent to the U.S. Court of Appeals for the Federal Circuit. The Commission's determination was affirmed on May 25, 2006. *MStar* v. *U.S. Int'l Trade Comm'n*, 2006 WL 1476137 (Fed. Cir. 2006).

On April 24, 2006, complainant Genesis filed a complaint for enforcement proceedings under Commission Rule 210.75. Genesis asserts that respondent MStar has violated the Commission's limited exclusion order by importing its Tsunami display controllers into the United States.

The Commission, having examined the complaint seeking a formal enforcement proceeding, and having found that the complaint complies with the requirements for institution of a formal enforcement proceeding contained in Commission rule 210.75, has determined to institute formal enforcement proceedings to determine whether MStar is in violation of the Commission's limited exclusion order issued in the investigation, and what, if any, enforcement measures are appropriate. The Commission has directed the ALJ not to consider Genesis' request for monetary penalties for any violation of the limited exclusion order in light of *Certain Lens-Fitted Film Packages*, Inv. No. 337–TA–406 (Consolidated Enforcement and Advisory Opinion Proceedings) Commission Opinion at 12 (June 23, 2003). The following entities are named as parties to the formal enforcement proceeding: (1) Complainant Genesis, (2) respondent MStar, and (3) a Commission investigative attorney to be designated by the Director, Office of Unfair Import Investigations.

The authority for the Commission's determination is contained in section 337 of the Tariff Act of 1930, as amended (19 U.S.C. 1337), and in § 210.75 of the Commission's Rules of Practice and Procedure (19 CFR 210.75).

Issued: June 23, 2006.

By order of the Commission.

Marilyn R. Abbott,

Secretary to the Commission.

[FR Doc. 06–5810 Filed 6–28–06; 8:45 am]

BILLING CODE 7020–02–P

INTERNATIONAL TRADE COMMISSION

[Investigation No. 731–TA–1104 (Preliminary)]

Certain Polyester Staple Fiber From China

AGENCY: United States International Trade Commission.

ACTION: Institution of antidumping investigation and scheduling of a preliminary phase investigation.

SUMMARY: The Commission hereby gives notice of the institution of an investigation and commencement of preliminary phase antidumping investigation No. 731–TA–1104 (Preliminary) under section 733(a) of the Tariff Act of 1930 (19 U.S.C. 1673b(a)) (the Act) to determine whether there is a reasonable indication that an industry in the United States is materially injured or threatened with material injury, or the establishment of an industry in the United States is materially retarded, by reason of imports from China of certain polyester staple fiber [1], provided for in subheading 5503.20.00 of the Harmonized Tariff Schedule of the United States, that are alleged to be sold in the United States at less than fair value. Unless the Department of Commerce extends the time for initiation pursuant to section 732(c)(1)(B) of the Act (19 U.S.C. 1673a(c)(1)(B)), the Commission must reach a preliminary determination in antidumping investigations in 45 days, or in this case by August 7, 2006. The Commission's views are due at Commerce within five business days thereafter, or by August 14, 2006.

For further information concerning the conduct of this investigation and rules of general application, consult the Commission's Rules of Practice and Procedure, part 201, subparts A through E (19 CFR part 201), and part 207, subparts A and B (19 CFR part 207).

Dates:*Effective Date:* June 23, 2006.

FOR FURTHER INFORMATION CONTACT: Jeremy Wise (202–205–3190), Office of Investigations, U.S. International Trade Commission, 500 E Street, SW., Washington, DC 20436. Hearing-impaired persons can obtain information on this matter by contacting the Commission's TDD terminal on 202–205–1810. Persons with mobility impairments who will need special assistance in gaining access to the Commission should contact the Office of the Secretary at 202–205–2000. General information concerning the Commission may also be obtained by accessing its Internet server (*http://www.usitc.gov*). The public record for this investigation may be viewed on the Commission's electronic docket (EDIS) at *http://edis.usitc.gov.*

[1] The merchandise subject to this proceeding is synthetic staple fibers, not carded, combed or otherwise processed for spinning, of polyester, measuring 3.3 decitex (3 denier) or more. This merchandise is cut to lengths varying from one inch (25 mm) to five inches (127 mm). The subject merchandise may be coated, usually with a silicon or other finish, or not coated. PSF is generally used as stuffing in sleeping bags, mattresses, ski jackets, comforters, cushions, pillows, and furniture.

The following products are excluded from the scope: (1) PSF of less than 3.3 decitex (less than 3 denier) currently imported under HTS statistical reporting number 5503.20.0025, known to the industry as PSF for spinning and generally used in woven and knit applications to produce textile and apparel products; (2) PSF of 10 to 18 denier that are cut to lengths of 6 to 8 inches and that are generally used in the manufacture of carpeting; and (3) low-melt PSF, defined as bi-component fiber with an outer, non-polyester sheath that melts at a significantly lower temperature than its inner polyester core (HTS 5503.20.0015).

Certain PSF is imported under statistical reporting numbers 5503.20.0045 and 5503.20.0065 of the Harmonized Tariff Schedule of the United States.

SUPPLEMENTARY INFORMATION:

Background. This investigation is being instituted in response to a petition filed on June 23, 2006, by DAK Americas, LLC, Charlotte, NC; Nan Ya Plastics Corporation, America, Lake City, SC; and Wellman, Inc., Shrewsbury, NJ.

Participation in the investigation and public service list. Persons (other than petitioners) wishing to participate in the investigation as parties must file an entry of appearance with the Secretary to the Commission, as provided in §§ 201.11 and 207.10 of the Commission's rules, not later than seven days after publication of this notice in the **Federal Register**. Industrial users and (if the merchandise under investigation is sold at the retail level) representative consumer organizations have the right to appear as parties in Commission antidumping investigations. The Secretary will prepare a public service list containing the names and addresses of all persons, or their representatives, who are parties to this investigation upon the expiration of the period for filing entries of appearance.

Limited disclosure of business proprietary information (BPI) under an administrative protective order (APO) and BPI service list. Pursuant to § 207.7(a) of the Commission's rules, the Secretary will make BPI gathered in this investigation available to authorized applicants representing interested parties (as defined in 19 U.S.C. 1677(9)) who are parties to the investigation under the APO issued in the investigation, provided that the application is made not later than seven days after the publication of this notice in the **Federal Register**. A separate service list will be maintained by the Secretary for those parties authorized to receive BPI under the APO.

Conference. The Commission's Director of Operations has scheduled a conference in connection with this investigation for 9:30 a.m. on July 14, 2006, at the U.S. International Trade Commission Building, 500 E Street, SW., Washington, DC. Parties wishing to participate in the conference should contact Jeremy Wise (202–205–3190) not later than July 7, 2006, to arrange for their appearance. Parties in support of the imposition of antidumping duties in this investigation and parties in opposition to the imposition of such duties will each be collectively allocated one hour within which to make an oral presentation at the conference. A nonparty who has testimony that may aid the Commission's deliberations may request permission to present a short statement at the conference.

Written submissions. As provided in §§ 201.8 and 207.15 of the Commission's rules, any person may submit to the Commission on or before July 19, 2006, a written brief containing information and arguments pertinent to the subject matter of the investigation. Parties may file written testimony in connection with their presentation at the conference no later than three days before the conference. If briefs or written testimony contain BPI, they must conform with the requirements of §§ 201.6, 207.3, and 207.7 of the Commission's rules. The Commission's rules do not authorize filing of submissions with the Secretary by facsimile or electronic means, except to the extent permitted by § 201.8 of the Commission's rules, as amended, 67 FR 68036 (November 8, 2002). Even where electronic filing of a document is permitted, certain documents must also be filed in paper form, as specified in II (C) of the Commission's Handbook on Electronic Filing Procedures, 67 FR 68168, 68173 (November 8, 2002).

In accordance with §§ 201.16(c) and 207.3 of the rules, each document filed by a party to the investigation must be served on all other parties to the investigation (as identified by either the public or BPI service list), and a certificate of service must be timely filed. The Secretary will not accept a document for filing without a certificate of service.

Authority: This investigation is being conducted under authority of title VII of the Tariff Act of 1930; this notice is published pursuant to section 207.12 of the Commission's rules.

By order of the Commission.
Issued: June 23, 2006.

Marilyn R. Abbott,

Secretary to the Commission.

[FR Doc. 06–5811 Filed 6–28–06; 8:45 am]

BILLING CODE 7020–02–P

DEPARTMENT OF LABOR

Office of the Secretary

Submission for OMB Review: Comment Request

June 22, 2006.

The Department of Labor (DOL) has submitted the following public information collection request (ICR) to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act of 1995 (Pub. L. 104–13, 44 U.S.C. Chapter 35). A copy of this ICR, with applicable supporting documentation, may be obtained by contacting Ira Mills at the Department of Labor on 202–693–4122 (this is not a toll-free number) or e-mail: *Mills.Ira@dol.gov.* This ICR can also be accessed online at *http://www.doleta.gov/OMBCN/OMBControlNumber.cfm.*

Comments should be sent to Office of Information and Regulatory Affairs, Attn: OMB Desk Officer for ETA, Office of Management and Budget, Room 10235, Washington, DC 20503, 202–395–7316 (this is not a toll free number), within 30 days from the date of this publication in the **Federal Register**.

The OMB is particularly interested in comments which:

- Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;
- Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;
- Enhance the quality, utility and clarity of the information to be collected; and
- Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, *e.g.*, permitting electronic submission of responses.

Agency: Employment and Training Administration (ETA).

Type of Review: Extension of a currently approved collection.

Title: Benefit Accuracy Measurement (BAM) Program.

OMB Number: 1205–0245.

Frequency: Weekly.

Type of Response: Reporting.

Affected Public: Individuals or households; business or other for-profit; not-for-profit institutions; farms; Federal Government; State, local, or tribal government.

Type of Response: Reporting.

Number of Respondents: 188,984.

Annual Responses: 47,160.

Average Response time: 63.1 hours.

Total Annual Burden Hours: 429,805.

Total Annualized Capital/Startup Costs: 38.4.

Total Annual Costs (operating/maintaining systems or purchasing services): 504.0.

Description: The Department of Labor is revising its Benefit Accuracy Measurement program to modify the data collection methodology because of a program change. The BAM program

provides reliable estimates of the accuracy of benefit payments and denied claims in the UI program, and identifies the sources of mispayments and improper denials so that their causes can be eliminated.

Ira L. Mills,

Departmental Clearance Officer/Team Leader.

[FR Doc. 06–5796 Filed 6–28–06; 8:45 am]

BILLING CODE 4510–30–P

DEPARTMENT OF LABOR

Office of the Secretary

Submission for OMB Review: Comment Request

June 22, 2006.

The Department of Labor (DOL) has submitted the following public information collection request (ICR) to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act of 1995 (Pub. L. 104–13, 44 U.S.C. Chapter 35). A copy of this ICR, with applicable supporting documentation, may be obtained by contacting Ira Mills at the Department of Labor on 202–693–4122 (this is not a toll-free number) or E-Mail: *Mills.Ira@dol.gov.* This ICR can also be accessed online at *http://www.doleta.gov/OMBCN/OMBControlNumber.cfm.*

Comments should be sent to Office of Information and Regulatory Affairs, Attn: OMB Desk Officer for ETA, Office of Management and Budget, Room 10235, Washington, DC 20503, 202–395–7316 (this is not a toll free number), within 30 days from the date of this publication in the **Federal Register.**

The OMB is particularly interested in comments which:

- Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;
- Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;
- Enhance the quality, utility and clarity of the information to be collected; and
- Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submission of responses.

Agency: Employment and Training Administration (ETA).

Type of Review: Extension of a currently approved collection.

Title: Work Opportunity Tax Credit (WOTC) and Welfare-to-Work (WtW) Tax Credit.

OMB Number: 1205–0371.

Frequency: Quarterly.

Affected Public: State, Local, or Tribal Government; Individuals or households; Business or other for-profit; Federal Government.

Type of Response: Recordkeeping; reporting.

Requirement	Total respondents	Frequency	Annual responses	Average response time (Hrs)	Annual burden hours
Form 9058*	52	Quarterly	208	1.00	208
Employer/Jobseeker Complete Form 9061	990,000	On Occasion	990,000	.33	326,700
States Process Form 9061	52	On Occasion	990,000	.33	326,700
Form 9062	52	On Occasion	40	.33	13
Form 9063	52	On Occasion	440,000	.33	145,200
Form 9065	52	Quarterly	208	1.00	208
Record Keeping*	52	Annually	52	931	48,412
Form 9057	52	Quarterly	208	1.00	208
Form 9059	52	Quarterly	208	1.00	208
Planning Guidance*	52	One Time	52	8.00	416
Modification Planning Guidance*	52	One Time	52	1.00	52
Total	990,520		2,421,028		848,325

Total Annualized Capital/Startup Costs: 0.

Total Annual Costs (operating/maintaining systems or purchasing services): 0.

Description: Data and information provided by the states on these forms are used for program planning, evaluation of Program performance and outcomes through states' quarterly report and for oversight/verification activities as mandated by the Omnibus Budget Reconciliation Act of 1990 (Pub. L. 101–508) section 11405(c), which extended indefinitely the $5 million set-aside for testing whether individuals certified as members of WOTC targeted groups are eligible for certification (including use of statistical sampling techniques). As long as there is a WOTC appropriation, this requirement continues in force and in accordance with Sections 51 and 51A of the Internal Revenue Code of 1986, as amended, Small Business Act of 1996, Taxpayer Relief Act of 1997, the Ticket to Work and Work Incentives Improvement Act of 1999 (Pub. L. 106–170), the Job Creation and Worker Assistance Act of 2002 (Pub. L. 107–147), The Social Security and Protection Act of 2004 (Pub. L. 108–203), and the Working Families Tax Relief Act of 2004 (Pub. L. 108–311).

Ira L. Mills,

Departmental Clearance Officer/Team Leader.

[FR Doc. 06–5797 Filed 6–28–06; 8:45 am]

BILLING CODE 4510–30–P

DEPARTMENT OF LABOR

Occupational Safety and Health Administration (OSHA)

Susan Harwood Training Grant Program, FY 2006 Budget

ACTION: Initial announcement of availability of funds and solicitation for grant applications.

Funding Opportunity No.: SHTG–FY–06–01

Catalog of Federal Domestic Assistance No.: 17.502

SUMMARY: The U.S. Department of Labor, Occupational Safety and Health Administration (OSHA) awards funds to nonprofit organizations to provide training and education programs for employers and workers about safety and

health topics selected by OSHA. Nonprofit organizations, including community-based and faith-based organizations, that are not an agency of a State or local government, are eligible to apply. State or local government-supported institutions of higher education are eligible to apply in accordance with 29 CFR part 95. This notice announces grant availability for Susan Harwood Training Program grants. This notice contains all of the necessary information and forms needed to apply for grant funding.

DATES: Grant applications must be received by the OSHA Office of Training and Education in Arlington Heights, Illinois, by 4:30 p.m. (central time) on Friday, July 21, 2006.

ADDRESSES: Grant applications must be sent to the attention of: Grants Officer, U.S. Department of Labor, OSHA Office of Training and Education, 2020 S. Arlington Heights Road, Arlington Heights, Illinois 60005–4102.

SUPPLEMENTARY INFORMATION:

I. Funding Opportunity Description

Overview of the Susan Harwood Training Grant Program

The Susan Harwood Training Grant Program provides funds for programs to train workers and employers to recognize, avoid, and prevent safety and health hazards in their workplaces. The program emphasizes three areas:

- Educating workers and employers in small businesses. A small business has 250 or fewer workers.
- Training workers and employers about new OSHA standards.
- Training workers and employers about high risk activities or hazards identified by OSHA through its Strategic Management Plan, or as part of an OSHA special emphasis program.

Grant Category Being Announced

OSHA will accept applications for the Targeted Topic training grant category in FY 2006.

Topics for the Targeted Topic Training Category

Organizations funded for Targeted Topic training category grants are expected to develop and provide occupational safety and health training and/or educational programs addressing one of the topics selected by OSHA, recruit workers and employers for the training, and conduct and evaluate the training. Grantees are also expected to conduct follow-up evaluations with people trained by their program to determine what, if any, changes were made to reduce hazards in their workplaces as a result of the training. If your organization plans to train workers or employers in any of the 26 states operating OSHA-approved State Plans, State OSHA requirements must be included in the training.

Ten different training topics were selected for this grant announcement. OSHA may award grants for some or all of the listed Targeted Topic training topics. Applicants wishing to address more than one of the announced grant topics must submit a separate grant application for each topic. Each application must propose a plan for developing and conducting training programs addressing the recognition and prevention of safety and health hazards for one of the topics listed below.

Construction Industry Hazards. Programs that train workers and employers in the recognition and prevention of safety and health hazards on *one* of the following topics:

- Falls in construction, including residential construction. Applicants must propose to conduct this training in English and Spanish. Additional languages may also be proposed.
- Focus Four construction hazards (falls, electrocution, caught-in and struck-by). Proposed training programs must include all four hazards.
- Work zone safety, including highway construction work zone safety and disaster site cleanup and recovery work zones.

General Industry Hazards. Programs that train workers and employers in the recognition and prevention of safety and health hazards on one of the following topics:

- Amputation hazards, including lockout/tagout hazards
- Landscaping and Horticulture (NAICS 56173/SIC 078)
- Oil and gas field services (NAICS 21311–12/SIC 138)

Other Safety and Health Topic Areas. Programs that train workers and employers in the recognition and prevention of safety and health hazards on one of the following topics:

- Disaster response and recovery
- Hexavalent chromium
- Workplace emergency planning, including the healthcare industry
- Overview of OSHA safety and health requirements for Tribal organizations and affected workers

II. Award Information

Targeted Topic grants will be awarded for a 12-month period. The project period for these grants begins September 30, 2006, and ends September 30, 2007. There is approximately $6.8 million available for this grant category. The average Federal award will be $175,000.

III. Eligibility Information

1. Eligible Applicants

Nonprofit organizations, including community-based and faith-based organizations, that are not an agency of a State or local government are eligible to apply. State or local government supported institutions of higher education are eligible to apply in accordance with 29 CFR part 95. Eligible organizations can apply independently for funding or in partnership with other eligible organizations, but in such a case, a lead organization must be identified. Sub-contracts must be awarded in accordance with 29 CFR 95.40–48, including OMB circulars requiring free and open competition for procurement transactions.

A 501(c)(4) nonprofit organization, as described in 26 U.S.C. 501(c)(4), that engages in lobbying activities will not be eligible for the receipt of Federal funds constituting an award, grant or loan. *See* 1 U.S.C. 1611.

Applicants other than State or local government supported institutions of higher education will be required to submit evidence of nonprofit status, preferably from the Internal Revenue Service (IRS).

Authority: The Occupational Safety and Health Act of 1970 and the Consolidated Appropriations Act, 2006, Pub. L. 109–149, authorize this program.

2. Cost Sharing or Matching

Applicants are not required to contribute non-Federal resources.

3. Other Eligibility Requirements

A. Legal Rules Pertaining to Inherently Religious Activities by Organizations that Receive Federal Financial Assistance

The U.S. Government is generally prohibited from providing ''direct'' financial assistance for inherently religious activities.[1]

The Grantee may be a faith-based organization or work with and partner with religious institutions; however, ''direct'' Federal assistance provided

[1] In this context, the term direct financial assistance means financial assistance that is provided directly by a government entity or an intermediate organization, as opposed to financial assistance that an organization receives as the result of the genuine and independent private choice of a beneficiary. In other contexts, the term ''direct'' financial assistance may be used to refer to financial assistance that an organization receives directly from the Federal government (also know as ''discretionary'' assistance), as opposed to assistance that it receives from a State or Local government (also know as ''indirect'' or ''block'' grant assistance). The term ''direct'' has the former meaning throughout this solicitation for grant applications (SGA).

under grants with the U. S. Department of Labor may not be used for religious instruction, worship, prayer, proselytizing or other inherently religious practices. 29 CFR Part 2, Subpart D governs the treatment in Department of Labor government programs of religious organizations and religious activities; the Grantee and sub-contractors are expected to be aware of and observe the regulations in this subpart.

IV. Address To Request Application Forms

1. Application Forms

Application forms are published as part of this **Federal Register** notice and in the **Federal Register**, which may be obtained from your nearest Federal depository library or online at *http://www.archives.gov/federal-register/index.html.* The complete **Federal Register** notice and application forms may also be downloaded from the OSHA Susan Harwood Training Grant Program Web site at *http://www.osha.gov/dcsp/ote/sharwood.html.*

2. Content and Form of Application Submission

Each grant application must address only one of the announced topics. Organizations interested in applying for grants for more than one of the announced topics must submit separate applications for each topic.

A. Required Contents

To be considered for a Harwood grant, an applicant must submit one (1) blue-ink signed original complete application in English plus two (2) copies that includes all of the information listed below. A complete application will contain the following forms and narrative sections. The parts are listed in the order in which they should appear in the application.

(a) Application for Federal Assistance form (SF 424). The individual signing the SF 424 form on behalf of the applicant must be authorized to bind the applicant. Your organization is required to have a Data Universal Number System (DUNS) number from Dun and Bradstreet to complete this form. Information about ''Obtaining a DUNS Number—A Guide for Federal Grant and Cooperative Agreement Applicants'' is available at *http://www.whitehouse.gov/omb/grants/duns_num_guide. pdf.*

(b) Survey on Ensuring Equal Opportunity for Applicants form (OMB No. 1890–0014).

(c) Program Summary (described further in subsection B below). The program summary is a short one-to-two page abstract that succinctly summarizes the proposed project and provides information about the applicant organization.

(d) Budget Information form (SF 424A).

(e) Detailed Project Budget Backup. The detailed budget backup will provide a detailed break out of the costs that are listed in Section B of the SF 424A Budget Information form.

If applicable: Provide a copy of approved indirect cost rate agreement, and statement of program income.

(f) A description of any voluntary non-Federal resource contribution to be provided by the applicant, including source of funds and estimated amount.

(g) Technical Proposal program narrative (described further in subsection B below), not to exceed 30 single-sided pages, double-spaced, 12-point font, containing: Problem Statement/Need for Funds; Administrative and Program Capability; and Workplan.

(h) Assurances form (SF 424B).

(i) Certifications form (OSHA 189).

(j) Supplemental Certification Regarding Lobbying Activities form.

(k) Organizational Chart.

(l) Evidence of Non-Profit status, preferably from the Internal Revenue Service (IRS), if applicable. (Does not apply to State and local government-supported institutions of higher education.)

(m) Accounting System Certification, if applicable. Organizations that receive less than $1 million annually in Federal grants must attach a certification signed by your certifying official stating that your organization has a functioning accounting system that meets the criteria below. Your organization may also designate a qualified entity (include the name and address in the documentation) to maintain a functioning accounting system that meets the criteria below. The certification should attest that your organization's accounting system provides for the following:

1. Accurate, current and complete disclosure of the financial results of each Federally sponsored project.

2. Records that identify adequately the source and application of funds for Federally sponsored activities.

3. Effective control over and accountability for all funds, property and other assets.

4. Comparison of outlays with budget amounts.

5. Written procedures to minimize the time elapsing between the transfer of funds.

6. Written procedures for determining the reasonableness, allocability and allowability of costs.

7. Accounting records, including cost accounting records that are supported by source documentation.

(n) Any attachments such as resumes of key personnel or position descriptions, exhibits, information on prior government grants, and signed letters of commitment to the project.

To be considered responsive to this solicitation, the application must consist of the above mentioned separate parts. Major sections and sub-sections of the application should be divided and clearly identified (*e.g.*, with tab dividers), and all pages shall be numbered. Standard forms, attachments, exhibits and the Program Summary abstract are not counted toward the page limit.

The forms listed above are included as a part of this **Federal Register** notice. The forms are also available on the OSHA grant web page at *http://www.osha.gov/dcsp/ote/sharwood.html.*

B. Budget Information

Applicants must include the following grant project budget information.

(a) Budget Information form (SF 424A).

(b) A Detailed Project Budget that clearly details the costs of performing all of the requirements presented in this solicitation. The detailed budget will break out the costs that are listed in Section B of the SF 424A Budget Information form.

Applicants are reminded to budget for compliance with the administrative requirements set forth. (Copies of all regulations that are referenced in this SGA are available on-line at no cost at *http://www.osha.gov/dcsp/ote/sharwood.html.*) This includes the costs of performing activities such as travel for two staff members, one program and one financial, to the Chicago area to attend a new grantee orientation meeting; financial audit, if required; project closeout; document preparation (*e.g.*, quarterly progress reports, project document); and ensuring compliance with procurement and property standards. The Detailed Project Budget should identify administrative costs separately from programmatic costs for both Federal and non-Federal funds. Administrative costs include indirect costs from the costs pool and the cost of activities, materials, meeting close-out requirements as described in Section VI, and personnel (*e.g.*, administrative assistants) who support the management and administration of the project but do not provide direct services to project

beneficiaries. Indirect cost charges, which are considered administrative costs, must be supported with a copy of an approved Indirect Cost Rate Agreement form. Administrative costs cannot exceed 25% of the total grant budget. The project budget should clearly demonstrate that the total amount and distribution of funds is sufficient to cover the cost of all major project activities identified by the applicant in its proposal, and must comply with Federal cost principles (which can be found in the applicable OMB Circulars).

(c) A description of any voluntary non-Federal resource contribution to be provided by the applicant, including source of funds and estimated amount.

C. Program Summary and Technical Proposal

The Program Summary and the Technical Proposal will contain the narrative segments of the application. The Program Summary abstract is not to exceed two pages. The Technical Proposal program narrative section is not to exceed 30 single-sided (8½″ x 11″ or A4), double-spaced, 12-point font, typed pages, consisting of the Problem Statement/Need for Funds, Administrative and Program Capability, and Workplan. Reviewers will only consider Technical Proposal information up to the 30-page limit. The Technical Proposal must demonstrate the capability to successfully administer the grant and to meet the objectives of this solicitation. The Technical Proposal will be rated in accordance with the selection criteria specified in Section V.

The Program Summary and Technical Proposal must include the following sections.

(a) Program Summary. An abstract of the application, not to exceed two pages, that must include the following information.

- Applicant organization's full legal name.
- Project director's name, title, street address, and mailing address if it is different from the street address, telephone and fax numbers, and e-mail address. The Project Director is the person who will be responsible for the day-to-day operation and administration of the program.
- Certifying Representative's name, title, street address, and mailing address if it is different from the street address, telephone and fax numbers, and e-mail address. The Certifying Representative is the official in your organization who is authorized to enter into grant agreements.
- Funding requested. List how much Federal funding you are requesting. If your organization is contributing non-Federal resources, also list the amount of non-Federal resources and the source of the funds.
- Grant Topic. List the grant topic and industry or subject area your organization has selected to target in its application.
- Summary of the Proposed Project. Write a brief program summary of your proposed project.
- Applicant Background. Describe your applicant organization, including its mission and a description of your membership, if any.

(b) The Technical Proposal program narrative segment, which is not to exceed 30 single-sided, double-spaced, 12-point font pages in length, must address each section listed below.

- Problem Statement/Need for Funds. Describe the hazards that will be addressed in your program, the target population(s) that will benefit from your training and education program, and the barriers that have prevented this population from receiving adequate training. When you discuss target populations, include geographic location(s), and the number of workers and employers.
- Administrative and Program Capability. Briefly describe your organization's functions and activities. Relate this description of functions to your organizational chart that is included in the application. If your organization is conducting, or has conducted within the last five years, any other government (Federal, State, or local) grant programs, the application must include an attachment (which will not count towards the page limit) providing information regarding previous grants including (a) the organization for which the work was done, and (b) the dollar value of the grant. If your organization has not had previous grant experience, you may partner with an organization that has grant experience to manage the grant. If you use this approach, the management organization must be identified and its grant program experience discussed.

Program Experience. Describe your organization's experience conducting the type of program that you are proposing. Include program specifics such as program title, numbers trained and duration of training. Experience includes safety and health experience, training experience with adults, and programs operated specifically for the selected target population(s). Nonprofit organizations, including community-based and faith-based organizations, that do not have prior experience in safety and health may partner with an established safety and health organization to acquire safety and health expertise.

Staff Experience. Describe the qualifications of the professional staff you will assign to the program. Include resumes of staff already on board. If some positions are vacant, include position descriptions/minimum hiring qualifications instead of resumes. Qualified staff are those with safety and health experience, training experience, or experience working with the target population.

- Workplan. The 12-month workplan should correlate with the grant project period that will begin September 30, 2006, and end September 30, 2007. An outline of specific items required in your workplan follows.

Plan Overview. Describe your plan for grant activities and the anticipated outcomes. The overall plan will describe such things as the development of training materials, the training content, recruiting of trainees, where or how training will take place, and the anticipated benefits to workers and employers receiving the training.

Activities. Break your overall plan down into activities or tasks. For each activity, explain what will be done, who will do it, when it will be done, and the results of the activity. When you discuss training, include the subjects to be taught, the length of the training sessions, and training location (classroom, worksites). Describe how you will recruit trainees for the training.

Quarterly Projections. For training and other quantifiable activities, estimate how many, *e.g.*, number of advisory committee meetings, classes to be conducted, workers and employers to be trained, etc., you will do each quarter of the grant (grant quarters match calendar quarters, i.e., January to March, April to June) and provide the training number totals for the grant. Quarterly projections are used to measure your actual performance against your plans. If you plan to conduct a train-the-trainer program, estimate the number of individuals you expect to be trained during the grant period by those who received the train-the-trainer training. These second tier training numbers should only be included if your organization is planning to follow up with the trainers to obtain this data during the grant period.

Materials. Describe each educational material you will produce under the grant, if not treated as a separate activity under *Activities* above. Provide a timetable for developing and producing the material. OSHA must review and approve training materials for technical accuracy and suitability of content before the materials may be used in your

grant program. Therefore, your timetable must include provisions for an OSHA review of draft and camera-ready products. For Targeted Topic training grants, any commercially-developed training materials you are proposing to utilize in your grant training must also go through an OSHA review before being used.

Evaluations. There are three types of evaluations that should be conducted. First, describe plans to evaluate the training sessions. Second, describe your plans to evaluate your progress in accomplishing the grant work activities listed in your application. This includes comparing planned and actual accomplishments. Discuss who is responsible for taking corrective action if plans are not being met. Third, describe your plans to assess the effectiveness of the training your organization is conducting. This will involve following-up, by survey or on-site review, if feasible, with people who attended the training to find out what changes were made to abate hazards in their workplaces. Include timetables for follow-up and for submitting a summary of the assessment results to OSHA.

(c) An organizational chart of the staff that will be working on this grant and their location within the applicant organization.

Attachments: Summaries of other relevant organizational experiences; information on prior government grants; resumes of key personnel and/or position descriptions; and signed letters of commitment to the project.

3. Submission Date, Times, and Addresses

Date: The closing date for receipt of applications is Friday, July 21, 2006. Applications must be received by 4:30 p.m. (central time) at the address below. Applications sent by e-mail, telegram, or facsimile (FAX) will not be accepted. Applications sent by other delivery services, such as Federal Express, UPS, etc., will be accepted; the applicant, however, bears the responsibility for timely submission. Applications that do not meet the conditions set forth in this notice will not be honored. No exceptions to the mailing and delivery requirements set forth in this notice will be granted.

Applications must be delivered to: Grants Officer, U.S. Department of Labor, OSHA Office of Training and Education, 2020 S. Arlington Heights Road, Arlington Heights, Illinois 60005–4102.

One (1) blue ink-signed original complete application in English plus two (2) copies of each application must be received at the designated place by the date and time specified or it will not be considered unless:

(a) It was sent by registered or certified mail no later than the fifth calendar day before the closing date; or

(b) It was sent by U.S. Postal Service Express Mail/Next Day Service from the post office to the addressee no later than 4:45 p.m. at the place of mailing two (2) working days (excluding weekends and Federal holidays and days when the Federal government is closed), prior to the closing date; or

(c) It is determined by the Government that the late receipt was due solely to mishandling by the Government after receipt at the U.S. Department of Labor at the address indicated.

The only acceptable evidence to establish the date of mailing of a late application sent by registered or certified mail is the U.S. Postal Service postmark on the envelope or wrapper and on the original receipt from the U.S. Postal Service. If the postmark is not legible, an application received after the above closing time and date shall be processed as if mailed late. ''Postmark'' means a printed, stamped, or otherwise placed impression (not a postage meter machine impression) that is readily identifiable without further action as having been applied and affixed by an employee of the U.S. Postal Service on the date of mailing. Therefore, applicants should request that the postal clerk place a legible hand cancellation ''bulls-eye'' postmark on both the receipt and the envelope or wrapper. The only acceptable evidence to establish the date of mailing of a late application sent by U.S. Postal Service Express Mail/Next Day Service from the Post Office to the addressee is the date entered by the Post Office receiving clerk on the ''Express Mail/Next Day Service—Post Office to Addressee'' label and the postmark on the envelope or wrapper on the original receipt from the U.S. Postal Service. ''Postmark'' has the same meaning as defined above.

4. Intergovernmental Review

The Harwood Training Grant Program is not subject to Executive Order 12372 Intergovernmental Review of Federal Programs.

5. Funding Restrictions

Grant funds may be spent on the following.

(a) Conducting training.

(b) Conducting other activities that reach and inform workers and employers about workplace occupational safety and health hazards and hazard abatement.

(c) Conducting outreach and recruiting activities to increase the number of workers and employers participating in the program.

(d) Developing educational materials for use in training.

Grant funds may not be used for the following activities under the terms of the grant program.

(a) Any activity that is inconsistent with the goals and objectives of the Occupational Safety and Health Act of 1970.

(b) Training individuals not covered by the Occupational Safety and Health Act.

(c) Training workers or employers from workplaces not covered by the Occupational Safety and Health Act. Examples include: State and local government workers in non-State Plan States, and workers referenced in section 4(b)(1) of the Act.

(d) Training on topics that do not cover the recognition, avoidance, and prevention of unsafe or unhealthy working conditions. Examples of unallowable topics include: Workers' compensation, first aid, and publication of materials prejudicial to labor or management.

(e) Assisting workers in arbitration cases or other actions against employers, or assisting employers and workers in the prosecution of claims against Federal, State or local governments.

(f) Duplicating services offered by OSHA, a State under an OSHA-approved State Plan, or consultation programs provided by State designated agencies under section 21(d) of the Occupational Safety and Health Act.

(g) Generating membership in the grantee's organization. This includes activities to acquaint nonmembers with the benefits of membership, inclusion of membership appeals in materials produced with grant funds, and membership drives.

(h) Administrative costs cannot exceed 25% of the total grant budget.

While the activities described above may be part of an organization's regular programs, the costs of these activities cannot be paid for by grant funds, whether the funds are from matching resources or from the Federally funded portion of the grant.

Determinations of allowable costs will be made in accordance with the applicable Federal cost principles, *e.g.*, Nonprofit Organizations—2 CFR Part 230, formerly OMB Circular A–122; Educational Institutions—2 CFR Part 220, formerly OMB Circular A–21. Disallowed costs are those charges to a grant that the grantor agency or its representative determines to not be allowed in accordance with the

applicable Federal Cost Principles or other conditions contained in the grant.

No applicant at any time will be entitled to reimbursement of pre-award costs.

V. Application Review Information

Grant applications will be reviewed by technical panels comprised of OSHA staff. The results of the grant reviews will be presented to the Assistant Secretary of OSHA, who will make the selection of organizations to be awarded grants. OSHA may award grants for some or all of the listed topic areas. It is anticipated that the grant awards will be announced in September 2006.

1. Evaluation Criteria

The technical panels will review grant applications against the criteria listed below on the basis of 100 maximum points.

Targeted Topic training grant category applications will be reviewed and rated as follows.

A. Technical Approach, Program Design—45 Points Total

Program Design

(1) The proposed training and education program must address the recognition and prevention of safety and health hazards for one of the Targeted Topic subject areas. (3 points)

Construction Industry Hazards. Programs that train workers and employers in the recognition and prevention of safety and health hazards on one of the following topics:

- Falls in construction, including residential construction. Applicants must propose to conduct this training in English and Spanish. Additional languages may also be proposed.
- Focus Four construction hazards (falls, electrocution, caught-in and struck-by). Proposed training programs must include all four hazards.
- Work zone safety, including highway construction work zone safety and disaster site cleanup and recovery work zones.

General Industry Hazards. Programs that train workers and employers in the recognition and prevention of safety and health hazards on one of the following topics:

- Amputation hazards, including lockout/tagout.
- Landscaping and Horticulture (NAICS 56173/SIC 078)
- Oil and gas field services (NAICS 21311–12/SIC 138)

Other Safety and Health Topics Areas. Programs that train workers and employers in the recognition and prevention of safety and health hazards on one of the following topics:

- Disaster response and recovery
- Hexavalent chromium
- Workplace emergency planning, including the healthcare industry
- Overview of OSHA safety and health requirements for Tribal organizations and affected workers

(2) The proposal plans to train workers and/or employers, clearly estimates the numbers to be trained, and clearly identifies the types of workers and employers to be trained. The training will reach workers and employers from multiple employers. (4 points)

(3) If the proposal contains a train-the-trainer program, the following information must be provided: (4 points)

- What ongoing support the grantee will provide to new trainers;
- The number of individuals to be trained as trainers;
- The estimated number of courses to be conducted by the new trainers;
- The estimated number of students to be trained by these new trainers; and
- A description of how the grantee will obtain data from the new trainers documenting their classes and student numbers.

(4) The workplan activities and training are described. The planned activities and training are tailored to the needs and levels of the workers and employers to be trained. The target audience to be served through the grant program is described. The training materials and training programs are tailored to the training needs of one or more of the following target audiences: small businesses; new businesses; limited English proficiency, non-literate and low literacy workers; youth; immigrant and minority workers, and other hard-to-reach workers; and workers in high-hazard industries and industries with high fatality rates. Organizations proposing to develop Spanish-language training materials should utilize the OSHA Dictionaries (English-to-Spanish and Spanish-to-English) for terminology. The dictionaries are available on the OSHA Web site at: *http://www.osha.gov/dcsp/compliance_assistance/spanish_dictionaries.html.* Organizations proposing to develop materials in languages other than English will also be required to provide an English version of the materials. (20 points)

(5) There is a plan to recruit trainees for the program. (3 points)

(6) If the proposal includes developing educational materials for use in the training program, there is a plan for OSHA to review the educational materials for technical accuracy and suitability of content during development. If commercially-developed training products will be used for the Targeted Topic training program, applicants should also plan for OSHA to review the materials before using the products in their grant program. (3 points)

(7) There are plans for three different types of evaluation. The plans include evaluating your organization's progress in accomplishing the grant work activities and accomplishments, evaluating your training sessions, and evaluating the program's effectiveness and impact to determine if the safety and health training and services provided resulted in workplace change. This includes a description of the evaluation plan to follow up with trainees to determine the impact the program has had in abating hazards and reducing worker injuries. (5 points)

(8) The application is complete, including forms, budget detail, narrative and workplan, and required attachments. (3 points)

B. Budget—20 Points Total

(1) The budgeted costs are reasonable. No more than 25% of the total budget is for administration. (10 points)

(2) The budget complies with Federal cost principles (which can be found in the applicable OMB Circulars) and with OSHA budget requirements contained in the grant application instructions. (5 points)

(3) The cost per trainee is less than $500 and the cost per training hour is reasonable. (5 points)

C. Past Performance—18 Points Total

(1) The organization applying for the grant demonstrates experience with occupational safety and health. Applicants that do not have prior experience in providing safety and health training to workers or employers may partner with an established safety and health organization to acquire safety and health expertise. (5 points)

(2) The organization applying for the grant demonstrates experience training adults in work-related subjects or in recruiting, training and working with the target audience for this grant. (5 points)

(3) The application organization demonstrates that the applicant has strong financial management and internal control systems. (5 points)

(4) The applicant organization has administered, or will work with an organization that has administered, a number of different Federal and/or State grants over the past five years. (3 points)

D. Experience and Qualification of Personnel—17 Points Total

(1) The staff to be assigned to the project has experience in occupational safety and health, the specific topic chosen, and in training adults. (10 points)

(2) Project staff has experience in recruiting, training, and working with the population your organization proposes to serve under the grant. (7 points)

2. Review and Selection Process

OSHA will screen all applications to determine whether all required proposal elements are present and clearly identifiable. Those that do not may be deemed non-responsive and may not be evaluated. A technical panel will objectively rate each complete application against the criteria described in this announcement. The panel recommendations to the Assistant Secretary are advisory in nature. The Assistant Secretary may establish a minimally acceptable rating range for the purpose of selecting qualified applicants. The Assistant Secretary will make a final selection determination based on what is most advantageous to the Government, considering factors such as panel findings, geographic presence of the applicants, Agency priorities, the best value to the government, cost, and other factors. The Assistant Secretary's determination for award under this solicitation for grant applications (SGA) is final.

3. Anticipated Announcement and Award Dates

Announcement of these awards is expected to occur by September 30, 2006. The grant agreement will be awarded by no later than September 30, 2006.

VI. Award Administration Information

1. Award Process

Organizations selected as grant recipients will be notified by a representative of the Assistant Secretary, usually from an OSHA Regional Office. An applicant whose proposal is not selected will be notified in writing.

Notice that an organization has been selected as a grant recipient does not constitute approval of the grant application as submitted. Before the actual grant award, OSHA will enter into negotiations concerning such items as program components, staffing and funding levels, and administrative systems. If the negotiations do not result in an acceptable submittal, the Assistant Secretary reserves the right to terminate the negotiation and decline to fund the proposal.

Note: Except as specifically provided, OSHA's acceptance of a proposal and an award of Federal funds to sponsor any program(s) does not provide a waiver of any grant requirement or procedures. For example, if an application identifies a specific sub-contractor to provide the services, the USDOL OSHA award does not provide the justification or basis to sole-source the procurement, *i.e.*, to avoid competition.

2. Administrative and National Policy Requirements

All grantees, including faith-based organizations, will be subject to applicable Federal laws and regulations (including provisions of appropriations law) and the applicable Office of Management and Budget (OMB) Circulars. The grant award(s) awarded under this SGA will be subject to the following administrative standards and provisions, if applicable.

29 CFR Part 2, Subpart D, new equal treatment regulations.

29 CFR Parts 31, 32, 35 and 36 as applicable.

29 CFR Part 93, new restrictions on lobbying.

29 CFR Part 95, which covers grant requirements for nonprofit organizations, including universities and hospitals. These are the Department of Labor regulations implementing 2 CFR Part 215, formerly OMB Circular A–110.

29 CFR Part 98, government-wide debarment and suspension (nonprocurement) and government wide requirements for drug-free workplace (grants).

2 CFR Part 220, formerly OMB Circular A–21, which describes allowable and unallowable costs for educational institutions.

2 CFR Part 230, formerly OMB circular A–122, which describes allowable and unallowable costs for other nonprofit organizations.

OMB Circular A–133, 29 CFR parts 96 and 99, which provide information about audit requirements.

Certifications. All applicants are required to certify to a drug-free workplace in accordance with 29 CFR part 98, to comply with the New Restrictions on Lobbying published at 29 CFR part 93, to make a certification regarding the debarment rules at 29 CFR part 98, and to complete a special lobbying certification.

Students. Grant-funded training programs must serve multiple employers and their employees. Grant-funded training programs must serve individuals covered by the Occupational Safety and Health Act of 1970. As a part of the grant close-out process, grantees must self-certify that their grant-funded programs and materials were not provided to ineligible audiences.

Other. In keeping with the policies outlined in Executive Orders 13256, 12928, 13230, and 13021 as amended, the grantee is strongly encouraged to provide subgranting opportunities to Historically Black Colleges and Universities, Hispanic Serving Institutions, and Tribal Colleges and Universities.

3. Special Program Requirements

OSHA review of educational materials. OSHA will review all educational materials produced by the grantee for technical accuracy and suitability of content during development and before final publication. OSHA will also review training curricula and purchased training materials for technical accuracy and suitability of content before the materials are used. Grantees developing training materials must follow all copyright laws and provide written certification that their materials are free from copyright infringements.

When grant recipients produce training materials, they must provide copies of completed materials to OSHA before the end of the grant period. OSHA has a lending program that circulates grant-produced audiovisual materials. Audiovisual materials produced by the grantee as a part of its grant program may be included in this lending program. In addition, all materials produced by grantees must be provided to OSHA in hard copy as well as in a digital format (CD ROM/DVD) for possible publication on the Internet by OSHA. Two copies of the materials must be provided to OSHA. Acceptable formats for training materials include Microsoft XP Word and PowerPoint.

As listed in 29 CFR 95.36, the Department of Labor reserves a royalty-free, nonexclusive and irrevocable right to reproduce, publish, or otherwise use any work produced under a grant, for Federal purposes, and to authorize others to do so. Applicants should note that grantees must agree to provide the Department of Labor a paid-up, nonexclusive and irrevocable license to reproduce, publish, or otherwise use for Federal purposes all products developed, or for which ownership was purchased, under an award including, but not limited to, curricula, training models, technical assistance products, and any related materials, and to authorize them to do so. Such uses include, but are not limited to, the right

to modify and distribute such products worldwide by any means, electronic or otherwise.

Acknowledgment of USDOL Funding. In all circumstances, all approved grant-funded materials developed by a grantee shall contain the following disclaimer:

This material was produced under grant number_____from the Occupational Safety and Health Administration, U.S. Department of Labor. It does not necessarily reflect the views or policies of the U.S. Department of Labor, nor does mention of trade names, commercial products, or organizations imply endorsement by the U.S. Government.

Public reference to grant: When issuing statements, press releases, requests for proposals, bid solicitations, and other documents describing projects or programs funded in whole or in part with Federal money, all Grantees receiving Federal funds must clearly state:

- The percentage of the total costs of the program or project, that will be financed with Federal money;
- The dollar amount of Federal financial assistance for the project or program; and
- The percentage and dollar amount of the total costs of the project or program that will be financed by non-governmental sources.

Use of U.S. Department of Labor (USDOL) OSHA Logo: In consultation with USDOL—OSHA, the Grantee(s) must acknowledge USDOL's role as described below:

- The USDOL–OSHA logo may be applied to USDOL-funded material prepared for world-wide distribution, including posters, videos, pamphlets, research documents, national survey results, impact evaluations, best practice reports, and other publications of global interest. The Grantee(s) must consult with USDOL–OSHA on whether the logo may be used on any such items prior to final draft or final preparation for distribution. In no event shall the USDOL–OSHA logo be placed on any item until USDOL–OSHA has given the Grantee written permission to use the logo on the item.
- All documents must include the following notice: ''This document does not necessarily reflect the views or policies of the U.S. Department of Labor, nor does mention of trade names, commercial products, or organizations imply endorsement by the U.S. Government.

4. Reporting

Grantees are required by Departmental regulations to submit program and financial reports each calendar quarter. All reports are due no later than 30 days after the end of the fiscal quarter and shall be submitted to the appropriate OSHA Regional Office.

The Grantee(s) shall submit financial reports on a quarterly basis. The first reporting period shall end on the last day of the fiscal quarter (December 31, March 31, June 30, or September 30) during which the grant was signed. Financial reports are due within 30 days of the end of the reporting period (*i.e.*, by January 30, April 30, July 30, and October 30).

The Grantee(s) shall use Standard Form (SF) 269A, Financial Status Report, to report the status of the funds, at the project level, during the grant period. A final SF269A shall be submitted no later than 90 days following completion of the grant period.

If the Grantee(s) uses the U.S. Department of Health and Human Services Payment Management System (HHS PMS), it must also send USDOL copies of the PSC 272 that it submits to HHS, on the same schedule. Otherwise, the Grantee(s) shall submit Standard Form (SF) 272, *Federal Cash Transactions Report,* on the same schedule as the SF269A.

Technical Program: After signing the agreement, the Grantee(s) shall submit technical progress reports to USDOL/OSHA Regional Offices at the end of each fiscal quarter. Technical progress reports provide both quantitative and qualitative information and a narrative assessment of performance for the preceding three-month period. OSHA Form 171 shall be used for reporting training numbers and a narrative report shall be provided that details grant activities conducted during the quarter, information on how the project is progressing in achieving its stated objectives, and notes any problems or delays along with corrective actions proposed. The first reporting period shall end on the last day of the fiscal quarter (December 31, March 31, June 30, or September 30) during which the grant was signed. Quarterly progress reports are due within 30 days of the end of the report period (*i.e.*, by January 30, April 30, July 30, and October 30.) Between reporting dates, the Grantees(s) shall also immediately inform USDOL/OSHA of significant developments and/or problems affecting the organization's ability to accomplish work.

VII. Agency Contacts

Any questions regarding this SGA should be directed to Cynthia Bencheck, e-mail address: *bencheck.cindy@dol.gov,* tel: 847–297–4810 (note that this is not a toll-free number), or Ernest Thompson, *thompson.ernest@dol.gov,* tel: 847–297–4810. To obtain further information on the Susan Harwood Training Grant Program of the U.S. Department of Labor, visit the OSHA Web site of the Occupational Safety and Health Administration at *http://www.osha.gov.*

Signed at Washington, DC, this 23rd day of June, 2006.

Edwin G. Foulke, Jr.,

Assistant Secretary of Labor.

Project Document Format

SF 424, Application for Federal Assistance form

Your organization is required to have a Data Universal Number System (DUNS) number (received from Dun and Bradstreet) to complete this form. Information about ''Obtaining a DUNS Number—A Guide for Federal Grant and Cooperative Agreement Applicants'' is available at *http://www.whitehouse.gov/omb/grants/duns_num_guide.pdf.*

Survey on Ensuring Equal Opportunity for Applicants form, OMB No. 1890–0014

Program Summary (not to exceed two pages)

Budget Information, SF 424A form

Detailed Project Budget Backup

If applicable: provide a copy of approved indirect cost rate agreement, and statement of program income.

Technical Proposal, program narrative, not to exceed 30 single-sided pages, double-spaced, 12-point font, containing:

Problem Statement/Need for Funds

Administrative and Program Capability

Workplan

Assurances (SF 424B)

Certifications form (OSHA 189)

Supplemental Certification Regarding Lobbying Activities

Organizational Chart

Evidence of Nonprofit status, (letter from the IRS) if applicable

Accounting System Certification, if applicable

Organizations that receive less than $1 million annually in Federal grants must attach a certification signed by your certifying official stating that your organization has a functioning accounting system that meets the criteria below. Your organization may also designate a qualified entity (include the name and address in the documentation) to maintain a functioning accounting system that meets the criteria below. The certification should attest that your organization's accounting system provides for the following:

1. Accurate, current and complete disclosure of the financial results of each Federally sponsored project.

2. Records that identify adequately the source and application of funds for Federally sponsored activities.

3. Effective control over and accountability for all funds, property and other assets.

4. Comparison of outlays with budget amounts.

5. Written procedures to minimize the time elapsing between the transfer of funds.

6. Written procedures for determining the reasonableness, allocability and allowability of costs.

7. Accounting records, including cost accounting records, that are supported by source documentation.

Attachments such as:

Summaries of other relevant organizational experience; information on prior government grants; resumes of key personnel or position descriptions; signed letters of commitment to the project.

Attachments (Forms)

SF–424, Application for Federal Assistance.
Survey on Ensuring Equal Opportunity for Applicants form, OMB No. 1890–0014.
SF–424A, Budget Information form.
SF 424B, Assurances.
OSHA 189 form, Certification.
Supplemental Certification Regarding Lobbying Activities.

The forms are also available at: *http://www.osha.gov/dcsp/ote/sharwood.html*

BILLING CODE 4510–26–P

APPLICATION FOR FEDERAL ASSISTANCE

Version 7/03

		2. DATE SUBMITTED	Applicant Identifier
1. TYPE OF SUBMISSION: Application ☐ **Construction** ☐ **Non-Construction**	Pre-application ☐ **Construction** ☐ **Non-Construction**	**3. DATE RECEIVED BY STATE**	State Application Identifier
		4. DATE RECEIVED BY FEDERAL AGENCY	Federal Identifier

5. APPLICANT INFORMATION

Legal Name:	**Organizational Unit:** Department:
Organizational DUNS:	Division:
Address: Street:	**Name and telephone number of person to be contacted on matters involving this application (give area code)** Prefix: / First Name:
City:	Middle Name
County:	Last Name
State: / Zip Code	Suffix:
Country:	Email:
6. EMPLOYER IDENTIFICATION NUMBER *(EIN):* ☐☐-☐☐☐☐☐☐☐	Phone Number (give area code) / Fax Number (give area code)

8. TYPE OF APPLICATION: ☐ **New** ☐ **Continuation** ☐ **Revision** If Revision, enter appropriate letter(s) in box(es) (See back of form for description of letters.) ☐ ☐ Other (specify)	**7. TYPE OF APPLICANT:** (See back of form for Application Types) Other (specify) **9. NAME OF FEDERAL AGENCY:**
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: ☐☐-☐☐☐ TITLE (Name of Program):	**11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT:**
12. AREAS AFFECTED BY PROJECT *(Cities, Counties, States, etc.):*	
13. PROPOSED PROJECT Start Date: / Ending Date:	**14. CONGRESSIONAL DISTRICTS OF:** a. Applicant / b. Project

15. ESTIMATED FUNDING:		**16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?**	
a. Federal	$ .00	a. Yes. ☐ THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON DATE:	
b. Applicant	$ .00		
c. State	$ .00		
d. Local	$ .00	b. No. ☐ PROGRAM IS NOT COVERED BY E. O. 12372	
e. Other	$ .00	☐ OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW	
f. Program Income	$ .00	**17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?**	
g. TOTAL	$ .00	☐ Yes If "Yes" attach an explanation. ☐ No	

18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT. THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.

a. Authorized Representative

Prefix	First Name	Middle Name
Last Name		Suffix
b. Title		c. Telephone Number (give area code)
d. Signature of Authorized Representative		e. Date Signed

Previous Edition Usable
Authorized for Local Reproduction

Standard Form 424 (Rev.9-2003)
Prescribed by OMB Circular A-102

INSTRUCTIONS FOR THE SF-424

Public reporting burden for this collection of information is estimated to average 45 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0043), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

This is a standard form used by applicants as a required face sheet for pre-applications and applications submitted for Federal assistance. It will be used by Federal agencies to obtain applicant certification that States which have established a review and comment procedure in response to Executive Order 12372 and have selected the program to be included in their process, have been given an opportunity to review the applicant's submission.

Item:	Entry:	Item:	Entry:
1.	Select Type of Submission.	11.	Enter a brief descriptive title of the project. If more than one program is involved, you should append an explanation on a separate sheet. If appropriate (e.g., construction or real property projects), attach a map showing project location. For preapplications, use a separate sheet to provide a summary description of this project.
2.	Date application submitted to Federal agency (or State if applicable) and applicant's control number (if applicable).	12.	List only the largest political entities affected (e.g., State, counties, cities).
3.	State use only (if applicable).	13	Enter the proposed start date and end date of the project.
4.	Enter Date Received by Federal Agency Federal identifier number: If this application is a continuation or revision to an existing award, enter the present Federal Identifier number. If for a new project, leave blank.	14.	List the applicant's Congressional District and any District(s) affected by the program or project
5.	Enter legal name of applicant, name of primary organizational unit (including division, if applicable), which will undertake the assistance activity, enter the organization's DUNS number (received from Dun and Bradstreet), enter the complete address of the applicant (including country), and name, telephone number, e-mail and fax of the person to contact on matters related to this application.	15	Amount requested or to be contributed during the first funding/budget period by each contributor. Value of in kind contributions should be included on appropriate lines as applicable. If the action will result in a dollar change to an existing award, indicate only the amount of the change. For decreases, enclose the amounts in parentheses. If both basic and supplemental amounts are included, show breakdown on an attached sheet. For multiple program funding, use totals and show breakdown using same categories as item 15.
6.	Enter Employer Identification Number (EIN) as assigned by the Internal Revenue Service.	16.	Applicants should contact the State Single Point of Contact (SPOC) for Federal Executive Order 12372 to determine whether the application is subject to the State intergovernmental review process.
7.	Select the appropriate letter in the space provided. A. State B. County C. Municipal D. Township E. Interstate F. Intermunicipal G. Special District H. Independent School District I. State Controlled Institution of Higher Learning J. Private University K. Indian Tribe L. Individual M. Profit Organization N. Other (Specify) O. Not for Profit Organization	17.	This question applies to the applicant organization, not the person who signs as the authorized representative. Categories of debt include delinquent audit disallowances, loans and taxes.
8.	Select the type from the following list: • "New" means a new assistance award. • "Continuation" means an extension for an additional funding/budget period for a project with a projected completion date. • "Revision" means any change in the Federal Government's financial obligation or contingent liability from an existing obligation. If a revision enter the appropriate letter: A. Increase Award B. Decrease Award C. Increase Duration D. Decrease Duration	18	To be signed by the authorized representative of the applicant. A copy of the governing body's authorization for you to sign this application as official representative must be on file in the applicant's office. (Certain Federal agencies may require that this authorization be submitted as part of the application.)
9.	Name of Federal agency from which assistance is being requested with this application.		
10.	Use the Catalog of Federal Domestic Assistance number and title of the program under which assistance is requested.		

SURVEY ON ENSURING EQUAL OPPORTUNITY FOR APPLICANTS

OMB No. 1890-0014 Exp. 02/28/09

Purpose: The Federal government is committed to ensuring that all qualified applicants, small or large, non-religious or faith-based, have an equal opportunity to compete for Federal funding. In order for us to better understand the population of applicants for Federal funds, we are asking nonprofit private organizations (not including private universities) to fill out this survey.

Upon receipt, the survey will be separated from the application. Information provided on the survey will not be considered in any way in making funding decisions and will not be included in the Federal grants database. While your help in this data collection process is greatly appreciated, completion of this survey is voluntary.

Instructions for Submitting the Survey: If you are applying using a hard copy application, please place the completed survey in an envelope labeled "Applicant Survey." Seal the envelope and include it along with your application package. If you are applying electronically, please submit this survey along with your application.

Applicant's (Organization) Name: _____

Applicant's DUNS Number: _____

Federal Program: _____ **CFDA Number:** _____

1. Has the applicant ever received a grant or contract from the Federal government?

☐ Yes ☐ No

2. Is the applicant a faith-based organization?

☐ Yes ☐ No

3. Is the applicant a secular organization?

☐ Yes ☐ No

4. Does the applicant have 501(c)(3) status?

☐ Yes ☐ No

5. Is the applicant a local affiliate of a national organization?

☐ Yes ☐ No

6. How many full-time equivalent employees does the applicant have? *(Check only one box).*

☐ 3 or Fewer ☐ 15-50
☐ 4-5 ☐ 51-100
☐ 6-14 ☐ over 100

7. What is the size of the applicant's annual budget? *(Check only one box.)*

☐ Less Than $150,000
☐ $150,000 - $299,999
☐ $300,000 - $499,999
☐ $500,000 - $999,999
☐ $1,000,000 - $4,999,999
☐ $5,000,000 or more

Survey Instructions on Ensuring Equal Opportunity for Applicants

Provide the applicant's (organization) name and DUNS number and the grant name and CFDA number.

1. Self-explanatory.

2. Self-identify.

3. Self-identify.

4. 501(c)(3) status is a legal designation provided on application to the Internal Revenue Service by eligible organizations. Some grant programs may require nonprofit applicants to have 501(c)(3) status. Other grant programs do not.

5. Self-explanatory.

6. For example, two part-time employees who each work half-time equal one full-time equivalent employee. If the applicant is a local affiliate of a national organization, the responses to survey questions 2 and 3 should reflect the staff and budget size of the local affiliate.

7. Annual budget means the amount of money your organization spends each year on all of its activities.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is 1890-0014. The time required to complete this information collection is estimated to average five (5) minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. **If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to:** The Agency Contact listed in this grant application package.

OMB No. 1890-0014 Exp. 02/28/09

Paperwork Burden Statement

SUPPLEMENTAL CERTIFICATION REGARDING LOBBYING ACTIVITIES

Section 18. of the "Lobbying Disclosure Act of 1995," signed by the President on December 19, 1995, requires that any organization described in section 501 (c)(4) of the Internal Revenue Code of 1986 which engages in lobbying activities shall not be eligible for the receipt of Federal funds constituting an award, grant, or loan. To insure compliance with these requirements, all applicants must complete statement 1. below. Those that are 501(c)(4) entities must also complete statement 2. All applicants must have the form signed by the certifying representative.

1. As an officer of _____,
(Applicant Organization Name)

this is to certify that we are _____/are not_____ an IRS 501 (c)(4) entity.

2. As an IRS 501(c)(4) entity, we have _____/have not_____ engaged in lobbying activities.

_____
Signature

_____
Official Title

BUDGET INFORMATION - Non-Construction Programs

OMB Approval No. 0348-0044

SECTION A - BUDGET SUMMARY

Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1.		$	$	$	$	$ 0.00
2.						0.00
3.						0.00
4.						0.00
5. Totals		$ 0.00	$ 0.00	$ 0.00	$ 0.00	$ 0.00

SECTION B - BUDGET CATEGORIES

6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY (1)	(2)	(3)	(4)	Total (5)
a. Personnel	$	$	$	$	$ 0.00
b. Fringe Benefits					0.00
c. Travel					0.00
d. Equipment					0.00
e. Supplies					0.00
f. Contractual					0.00
g. Construction					0.00
h. Other					0.00
i. Total Direct Charges *(sum of 6a-6h)*	0.00	0.00	0.00	0.00	0.00
j. Indirect Charges					0.00
k. TOTALS *(sum of 6i and 6j)*	$ 0.00	$ 0.00	$ 0.00	$ 0.00	$ 0.00
7. Program Income	$	$	$	$	$ 0.00

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Standard Form 424A (Rev. 7-97)
Prescribed by OMB Circular A-102

Previous Edition Usable

SECTION C - NON-FEDERAL RESOURCES				
(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e) TOTALS
8.	$	$	$	$ 0.00
9.				0.00
10.				0.00
11.				0.00
12. TOTAL *(sum of lines 8-11)*	$ 0.00	$ 0.00	$ 0.00	$ 0.00

SECTION D - FORECASTED CASH NEEDS					
	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13. Federal	$ 0.00	$	$	$	$
14. Non-Federal	0.00				
15. TOTAL *(sum of lines 13 and 14)*	$ 0.00	$ 0.00	$ 0.00	$ 0.00	$ 0.00

SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT				
(a) Grant Program	FUTURE FUNDING PERIODS (Years)			
	(b) First	(c) Second	(d) Third	(e) Fourth
16.	$	$	$	$
17.				
18.				
19.				
20. TOTAL *(sum of lines 16-19)*	$ 0.00	$ 0.00	$ 0.00	$ 0.00

SECTION F - OTHER BUDGET INFORMATION	
21. Direct Charges:	22. Indirect Charges:
23. Remarks:	

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INSTRUCTIONS FOR THE SF-424A

Public reporting burden for this collection of information is estimated to average 180 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0044), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

General Instructions

This form is designed so that application can be made for funds from one or more grant programs. In preparing the budget, adhere to any existing Federal grantor agency guidelines which prescribe how and whether budgeted amounts should be separately shown for different functions or activities within the program. For some programs, grantor agencies may require budgets to be separately shown by function or activity. For other programs, grantor agencies may require a breakdown by function or activity. Sections A, B, C, and D should include budget estimates for the whole project except when applying for assistance which requires Federal authorization in annual or other funding period increments. In the latter case, Sections A, B, C, and D should provide the budget for the first budget period (usually a year) and Section E should present the need for Federal assistance in the subsequent budget periods. All applications should contain a breakdown by the object class categories shown in Lines a-k of Section B.

Section A. Budget Summary Lines 1-4 Columns (a) and (b)

For applications pertaining to a *single* Federal grant program (Federal Domestic Assistance Catalog number) and *not requiring* a functional or activity breakdown, enter on Line 1 under Column (a) the Catalog program title and the Catalog number in Column (b).

For applications pertaining to a *single* program *requiring* budget amounts by multiple functions or activities, enter the name of each activity or function on each line in Column (a), and enter the Catalog number in Column (b). For applications pertaining to multiple programs where none of the programs require a breakdown by function or activity, enter the Catalog program title on each line in *Column* (a) and the respective Catalog number on each line in Column (b).

For applications pertaining to *multiple* programs where one or more programs *require* a breakdown by function or activity, prepare a separate sheet for each program requiring the breakdown. Additional sheets should be used when one form does not provide adequate space for all breakdown of data required. However, when more than one sheet is used, the first page should provide the summary totals by programs.

Lines 1-4, Columns (c) through (g)

For new applications, leave Column (c) and (d) blank. For each line entry in Columns (a) and (b), enter in Columns (e), (f), and (g) the appropriate amounts of funds needed to support the project for the first funding period (usually a year).

For continuing grant program applications, submit these forms before the end of each funding period as required by the grantor agency. Enter in Columns (c) and (d) the estimated amounts of funds which will remain unobligated at the end of the grant funding period only if the Federal grantor agency instructions provide for this. Otherwise, leave these columns blank. Enter in columns (e) and (f) the amounts of funds needed for the upcoming period. The amount(s) in Column (g) should be the sum of amounts in Columns (e) and (f).

For supplemental grants and changes to existing grants, do not use Columns (c) and (d). Enter in Column (e) the amount of the increase or decrease of Federal funds and enter in Column (f) the amount of the increase or decrease of non-Federal funds. In Column (g) enter the new total budgeted amount (Federal and non-Federal) which includes the total previous authorized budgeted amounts plus or minus, as appropriate, the amounts shown in Columns (e) and (f). The amount(s) in Column (g) should not equal the sum of amounts in Columns (e) and (f).

Line 5 - Show the totals for all columns used.

Section B Budget Categories

In the column headings (1) through (4), enter the titles of the same programs, functions, and activities shown on Lines 1-4, Column (a), Section A. When additional sheets are prepared for Section A, provide similar column headings on each sheet. For each program, function or activity, fill in the total requirements for funds (both Federal and non-Federal) by object class categories.

Line 6a-i - Show the totals of Lines 6a to 6h in each column.

Line 6j - Show the amount of indirect cost.

Line 6k - Enter the total of amounts on Lines 6i and 6j. For all applications for new grants and continuation grants the total amount in column (5), Line 6k, should be the same as the total amount shown in Section A, Column (g), Line 5. For supplemental grants and changes to grants, the total amount of the increase or decrease as shown in Columns (1)-(4), Line 6k should be the same as the sum of the amounts in Section A, Columns (e) and (f) on Line 5.

Line 7 - Enter the estimated amount of income, if any, expected to be generated from this project. Do not add or subtract this amount from the total project amount, Show under the program

INSTRUCTIONS FOR THE SF-424A (continued)

narrative statement the nature and source of income. The estimated amount of program income may be considered by the Federal grantor agency in determining the total amount of the grant.

Section C. Non-Federal Resources

Lines 8-11 Enter amounts of non-Federal resources that will be used on the grant. If in-kind contributions are included, provide a brief explanation on a separate sheet.

Column (a) - Enter the program titles identical to Column (a), Section A. A breakdown by function or activity is not necessary.

Column (b) - Enter the contribution to be made by the applicant.

Column (c) - Enter the amount of the State's cash and in-kind contribution if the applicant is not a State or State agency. Applicants which are a State or State agencies should leave this column blank.

Column (d) - Enter the amount of cash and in-kind contributions to be made from all other sources.

Column (e) - Enter totals of Columns (b), (c), and (d).

Line 12 - Enter the total for each of Columns (b)-(e). The amount in Column (e) should be equal to the amount on Line 5, Column (f), Section A.

Section D. Forecasted Cash Needs

Line 13 - Enter the amount of cash needed by quarter from the grantor agency during the first year.

Line 14 - Enter the amount of cash from all other sources needed by quarter during the first year.

Line 15 - Enter the totals of amounts on Lines 13 and 14.

Section E. Budget Estimates of Federal Funds Needed for Balance of the Project

Lines 16-19 - Enter in Column (a) the same grant program titles shown in Column (a), Section A. A breakdown by function or activity is not necessary. For new applications and continuation grant applications, enter in the proper columns amounts of Federal funds which will be needed to complete the program or project over the succeeding funding periods (usually in years). This section need not be completed for revisions (amendments, changes, or supplements) to funds for the current year of existing grants.

If more than four lines are needed to list the program titles, submit additional schedules as necessary.

Line 20 - Enter the total for each of the Columns (b)-(e). When additional schedules are prepared for this Section, annotate accordingly and show the overall totals on this line.

Section F. Other Budget Information

Line 21 - Use this space to explain amounts for individual direct object class cost categories that may appear to be out of the ordinary or to explain the details as required by the Federal grantor agency.

Line 22 - Enter the type of indirect rate (provisional, predetermined, final or fixed) that will be in effect during the funding period, the estimated amount of the base to which the rate is applied, and the total indirect expense.

Line 23 - Provide any other explanations or comments deemed necessary.

OMB Approval No. 0348-0040

ASSURANCES - NON-CONSTRUCTION PROGRAMS

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0040), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

1. Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application.

2. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.

3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.

4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.

5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).

6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee 3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.

7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.

8. Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.

9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements.

10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is $10,000 or more.

11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).

12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.

13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).

14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.

15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.

16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.

17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."

18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL	TITLE
APPLICANT ORGANIZATION	DATE SUBMITTED June 12, 2006

Standard Form 424B (Rev. 7-97) Back

CERTIFICATIONS

U.S. DEPARTMENT OF LABOR
Occupational Safety and Health Administration

Certification Regarding Drug-Free Workplace Requirements

1. The grantee certifies that it will or will continue to provide a drug-free workplace by:

   (a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;

   (b) Establishing an ongoing drug-free awareness program to inform employees about:

      (1) The dangers of drug abuse in the workplace;

      (2) The grantee's policy of maintaining a drug-free workplace;

      (3) Any available drug counseling, rehabilitation, and employee assistance programs; and

      (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

   (c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a).

   (d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will:

      (1) Abide by the terms of the statement; and

      (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction.

   (e) Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant.

   (f) Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph (d) (2), with respect to any employee who is so convicted:

      (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

      (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency.

   (g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e) and (f).

2. The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

   Place of Performance (street address, city, county, State, ZIP code)

   _____

   _____

   _____

   Check [ ] if there are workplaces on file that are not identified here.

Certification Regarding Debarment, Suspension and Other Responsibility Matters

1. The prospective grantee certifies to the best of its knowledge and belief, that it and its principals:

   (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;

   (b) Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or

a criminal offense in connection with obtaining, attempting to obtain or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

(c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and

(d) Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.

2. Where the prospective grantee is unable to certify to any of the statements in this certification, such prospective grantee shall attach an explanation to this proposal.

Lobbying Certification (Applications of $100,000 or more)

The undersigned certifies, to the best of his or her knowledge and belief, that:

1. No Federal appropriated funds have been paid or will be paid by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal grant, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activity," in accordance with its instructions.

3. The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each failure.

Signature of Certifying Representative

Date

Typed Name and Title

Name of Applicant Organization

OSHA Form 189 5/98 edition

[FR Doc. 06–5790 Filed 6–28–06; 8:45 am]
BILLING CODE 4510–26–C

NUCLEAR REGULATORY COMMISSION

Agency Information Collection Activities: Submission for the Office of Management and Budget (OMB) Review; Comment Request

AGENCY: U.S. Nuclear Regulatory Commission (NRC).

ACTION: Notice of the OMB review of information collection and solicitation of public comment.

SUMMARY: The NRC has recently submitted to OMB for review the following proposal for the collection of information under the provisions of the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35). The NRC hereby informs potential respondents that an agency may not conduct or sponsor, and that a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Information pertaining to the requirement to be submitted:

1. *Type of submission:* Revision and extension.

2. *The title of the information collection:* 10 CFR part 110, Export and Import of Nuclear Equipment and Material

3. *The form number if applicable:* Not applicable.

4. *How often the collection is required:* On occasion.

5. *Who is required or asked to report:* Any person in the U.S. who wishes to export: (a) Nuclear equipment and material subject to the requirements of a specific license, (b) radioactive waste subject to the requirements of a specific license, and (c) incidental radioactive material that is a contaminant of shipments of more than 100 kilograms of non-waste material using existing NRC general licenses.

6. *An estimate of the number of annual responses:* 1298.

7. *The estimated number of annual respondents:* 62.

8. *An estimate of the total number of hours need annually to complete the requirement or request:* 857 [478 reporting + 379 recordkeeping (0.66 hours per response)].

9. *An indication of whether section 3507(d), Public Law 104–13 applies:* Not applicable.

10. *Abstract:* 10 CFR part 110 provides application, reporting, and recordkeeping requirements for export and imports of nuclear material and equipment subject to the requirements of a specific license or a general license and exports of incidental radioactive material. The information collected and maintained pursuant to 10 CFR part 110 enables the NRC to authorize only imports and exports which are not inimical to U.S. common defense and security and which meet applicable statutory, regulatory, and policy requirements.

A copy of the final supporting statement may be viewed free of charge at the NRC Public Document Room, One White Flint North, 11555 Rockville Pike, Room O–1 F21, Rockville, MD 20852. OMB clearance requests are available at the NRC worldwide Web site: *http://www.nrc.gov/public-involve/doc-comment/omb/index.html.* The document will be available on the NRC home page site for 60 days after the signature date of this notice.

Comments and questions should be directed to the OMB reviewer listed below by July 31, 2006. Comments received after this date will be considered if it is practical to do so, but assurance of consideration cannot be given to comments received after this date.

OMB Desk Officer, Office of Information and Regulatory Affairs (3150–0036), NEOB–10202, Office of Management and Budget, Washington, DC 20503.

Comments can also be submitted by telephone at (202) 395–3087.

The NRC Clearance Officer is Brenda Jo. Shelton, (301) 415–7233.

Dated at Rockville, Maryland, this 23rd day of June 2006.

For the Nuclear Regulatory Commission

Brenda Jo. Shelton,

NRC Clearance Officer, Office of the Chief Information Officer.

[FR Doc. E6–10263 Filed 6–28–06; 8:45 am]

BILLING CODE 7590–01–P

NUCLEAR REGULATORY COMMISSION

Agency Information Collection Activities: Submission for the Office of Management and Budget (OMB) Review; Comment Request

AGENCY: U.S. Nuclear Regulatory Commission (NRC).

ACTION: Notice of the OMB review of information collection and solicitation of public comment.

SUMMARY: The NRC has recently submitted to OMB for review the following proposal for the collection of information under the provisions of the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35). The NRC hereby informs potential respondents that an agency may not conduct or sponsor, and that a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

1. *Type of submission, new, revision, or extension:* Revision.

2. *The title of the information collection:* 10 CFR part 140, ''Financial Protection Requirements and Indemnity Agreements.''

3. *The form number if applicable:* N/A.

4. *How often the collection is required:* As necessary in order for NRC to meet its responsibilities called for in sections 170 and 193 of the Atomic Energy Act of 1954, as amended (the Act).

5. *Who will be required or asked to report:* Licensees authorized to operate reactor facilities in accordance with 10 CFR part 50 and licensees authorized to construct and operate a uranium enrichment facility in accordance with 10 CFR parts 40 and 70.

6. *An estimate of the number of annual responses:* 151.

7. *The estimated number of annual respondents:* 91.

8. *An estimate of the total number of hours needed annually to complete the requirement or request:* 1,307.

9. *An indication of whether section 3507(d), Public Law 104–13 applies:* N/A.

10. *Abstract:* 10 CFR part 140 of the NRC's regulations specifies information to be submitted by licensees to enable the NRC to assess (a) the financial protection required of licensees and for the indemnification and limitation of liability of certain licensees and other persons pursuant to section 170 of the Atomic Energy Act of 1954, as amended, and (b) the liability insurance required of uranium enrichment facility licensees pursuant to section 193 of the Atomic Energy Act of 1954, as amended.

A copy of the final supporting statement may be viewed free of charge at the NRC Public Document Room, One White Flint North, 11555 Rockville Pike, Room O–1 F21, Rockville, MD 20852. OMB clearance requests are available at the NRC worldwide Web site: *http://www.nrc.gov/public-involve/doc-comment/omb/index.html.* The document will be available on the NRC home page site for 60 days after the signature date of this notice.

Comments and questions should be directed to the OMB reviewer listed below by July 31, 2006. Comments received after this date will be considered if it is practical to do so, but assurance of consideration cannot be

given to comments received after this date.

John A. Asalone, Office of Information and Regulatory Affairs (3150–0039), NEOB–10202, Office of Management and Budget, Washington, DC 20503.

Comments can also be e-mailed to *John_A._Asalone@omb.eop.gov* or submitted by telephone at (202) 395–4650.

The NRC Clearance Officer is Brenda Jo. Shelton, 301–415–7233.

Dated at Rockville, Maryland, this 22nd day of June, 2006.

For the Nuclear Regulatory Commission.

Brenda Jo. Shelton,

NRC Clearance Officer, Office of Information Services.

[FR Doc. E6–10264 Filed 6–28–06; 8:45 am]

BILLING CODE 7590–01–P

NUCLEAR REGULATORY COMMISSION

Agency Information Collection Activities: Submission for the Office of Management and Budget (OMB) Review; Comment Request

AGENCY: U.S. Nuclear Regulatory Commission (NRC).

ACTION: Notice of the OMB review of information collection and solicitation of public comment.

SUMMARY: The NRC has recently submitted to OMB for review the following proposal for the collection of information under the provisions of the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35). The NRC hereby informs potential respondents that an agency may not conduct or sponsor, and that a person is not required to respond to, a collection of information unless it displays a current valid OMB control number.

1. *Type of submission, new, revision, or extension:* Revision.

2. *The title of the information collection:* 10 CFR part 150, ''Exemptions and Continued Regulatory Authority in Agreement States and in Offshore Waters under Section 274.''

3. *The form number if applicable:* Not applicable.

4. *How often the collection is required:* 10 CFR 150.16(b), 150.17(c), and 150.19(c) require the submission of reports following specified events, such as the theft or unlawful diversion of licensed radioactive material. The source material inventory reports required under 10 CFR 150.17(b) must be submitted annually by certain licensees.

5. *Who is required or asked to report:* Agreement State licensees authorized to possess source or special nuclear material at certain types of facilities, or at any one time and location in greater than specified amounts. In addition, persons engaging in activities in non-Agreement States, in areas of exclusive Federal jurisdiction within Agreement States, or in offshore waters.

6. *An estimate of the number of responses:* 12.

7. *The estimated number of annual respondents:* 10.

8. *The number of hours needed annually to complete the requirement or request:* 35 hours.

9. *An indication of whether section 3507(d), Public Law 104–13 applies:* Not applicable.

10. *Abstract:* 10 CFR part 150 provides certain exemptions from NRC regulations for persons in Agreement States. Part 150 also defines activities in Agreement States and in offshore waters over which NRC regulatory authority continues, including certain information collection requirements. The information is needed to permit NRC to make reports to other governments and the International Atomic Energy Agency in accordance with international agreements. The information is also used to carry out NRC's safeguards and inspection programs.

A copy of the final supporting statement may be viewed free of charge at the NRC Public Document Room, One White Flint North, 11555 Rockville Pike, Room O–1 F21, Rockville, MD 20852. OMB clearance requests are available at the NRC worldwide Web site: *http://www.nrc.gov/public-involve/doc-comment/omb/index.html.* The document will be available on the NRC home page site for 60 days after the signature date of this notice.

Comments and questions should be directed to the OMB reviewer listed below by July 31, 2006. Comments received after this date will be considered if it is practical to do so, but assurance of consideration cannot be given to comments received after this date.

OMB Desk Officer, Office of Information and Regulatory Affairs (3150–0032), NEOB–10202, Office of Management and Budget, Washington, DC 20503.

Comments can also be submitted by telephone at (202) 395–3087.

The NRC Clearance Officer is Brenda Jo. Shelton, 301–415–7233.

Dated at Rockville, Maryland, this 23rd day of June 2006.

For the Nuclear Regulatory Commission.

Brenda Jo. Shelton,

NRC Clearance Officer, Office of the Chief Information Officer.

[FR Doc. E6–10266 Filed 6–28–06; 8:45 am]

BILLING CODE 7590–01–P

NUCLEAR REGULATORY COMMISSION

[Docket No. 030–06839]

Hawaii Agriculture Research Center, Kunia Substation, Kunia, HI: Issuance of Environmental Assessment and Finding of No Significant Impact for License Amendment

AGENCY: Nuclear Regulatory Commission.

ACTION: Issuance of Environmental Assessment and Finding of No Significant Impact for License Amendment.

FOR FURTHER INFORMATION CONTACT: D. Blair Spitzberg, Ph.D., Chief, Fuel Cycle and Decommissioning Branch, Division of Nuclear Materials Safety, Region IV, U.S. Nuclear Regulatory Commission, 611 Ryan Plaza Drive, Suite 400, Arlington, TX 76011. Telephone: (817) 860–8100; e-mail: *dbs@nrc.gov.*

SUPPLEMENTARY INFORMATION:

I. Introduction

The U.S. Nuclear Regulatory Commission (NRC) is considering the issuance of an amendment to Material License No. 53–00515–01, as requested by the Hawaii Agriculture Research Center (the Licensee), to authorize release of the Kunia Substation at Kunia, Hawaii, for unrestricted use. The Licensee is authorized to possess radioactive material for conducting tracer studies in plants and soils and for laboratory analysis of samples. On December 2, 2005, the Licensee requested that NRC release the facility for unrestricted use. The Licensee conducted radiological surveys of the facility to demonstrate that the site meets the license termination criteria specified in Subpart E to 10 CFR part 20 for unrestricted release.

The NRC has prepared an Environmental Assessment (EA) in support of this proposed action in accordance with the requirements of Title 10, Code of Federal Regulations (CFR), part 51 (10 CFR part 51). Based on the EA, the NRC has concluded that a Finding of No Significant Impact (FONSI) is appropriate with respect to the proposed action. The amendment will be issued to the Licensee following the publication of this FONSI and EA in the **Federal Register**.

II. Environmental Assessment

Identification of Proposed Action: The proposed action is to remove the Kunia Substation from License Condition 10 as a location of use. Once the building is removed from the license, the licensee will be free to use the building in any manner without NRC restriction.

The Need for the Proposed Action: The licensee no longer conducts licensed activities in this building and desires to release the building for unrestricted use. If the site is properly decommissioned, the licensee would then be in compliance with the Timeliness Rule requirements of 10 CFR 30.36, ''Expiration and Termination of Licenses and Decommissioning of Sites and Separate Buildings or Outdoor Areas.''

Environmental Impacts of the Proposed Action: The Kunia Substation is a 4,000 ft^2 (372 m^2) building that housed a 300 ft^2 (28 m^2) radiologically restricted area. The licensee used carbon-14, a long-lived low energy beta radiation emitter, at this location between 1975–1998. The licensee possessed a total of 11.5 millicuries (4.26E+8 becquerels) of carbon-14 for experiments. At the conclusion of these experiments, the contaminated soil and plant material were either radiologically sampled and free-released or shipped offsite for disposal.

By letter dated December 2, 2005, the licensee requested amendment of its license to remove Kunia Substation as a location of use. Attached to the request was a report of a final status survey that was conducted during 2005. The survey included scan surveys for fixed/total contamination and swipe sampling for removable contamination. The response and operability of the instrumentation used were verified using carbon-14 check sources. Scan survey results were indistinguishable from background levels. Most swipe sample results were below the instrument's minimum detectable activity level of 17.3 disintegrations per minute (0.288 becquerels per minute) per swipe sample. The highest sample result was 24 disintegrations per minute per swipe (0.4 becquerels per minute per swipe).

Regulation 10 CFR 20.1402, Radiological Criteria for Unrestricted Use, states in part that a site will be considered acceptable for unrestricted use if the residual radioactivity that is distinguishable from background radiation results in a total effective dose equivalent not to exceed 25 millirems (0.25 mSv) per year to an average member of the critical group. The NRC's NUREG–1757, Volume 1, Revision 1, ''Consolidated NMSS Decommissioning Guidance,'' Table B.1 provides screening values for building surface contamination that are equivalent to 25 millirems (0.25 mSv) per year. The NRC-approved screening value for carbon-14 is 3.7E+6 disintegrations per minute (6.18E+4 becquerels)/100 cm^2. Assuming a loose/removable contamination fraction of 10-percent, the removable surface contamination screening value is 3.7E+5 disintegrations per minute (6.18E+3 becquerels)/100 cm^2. In summary, the licensee's final status survey results were well below the NRC-approved screening values.

A second method to demonstrate compliance with 10 CFR 20.1402 is the use of dose modeling. The licensee conducted dose modeling to estimate potential doses to members of the public from carbon-14 radioactivity in soil. The licensee conservatively assumed that all 11.5 millicuries (4.26E+8 becquerels) of carbon-14 were dispersed into the area soil resulting in a soil activity of 26 picocuries (57.7 becquerels) per gram. Using Version 6.3 of the RESRAD modeling code with all default parameters, including the default carbon-14 activity of 100 picocuries (222 becquerels) per gram, the model calculated a peak dose of 132 millirems (1.32 mSv) per year. The peak dose occurs at 4.28 years. The licensee discontinued use of carbon-14 at Kunia Substation in 1998. Dose modeling further demonstrates that by the seventh year (2005), the annual dose drops to below 0.03 millirems (3E=4 mSV) per year. Through dose modeling of potential soil contamination, the licensee conservatively demonstrated that the annual total effective dose equivalent is currently less than the 25-millirem (0.25 mSv) regulatory limit.

The NRC staff reviewed docket file records to identify any radiological or non-radiological hazards that may have impacted the environment. Records indicate that two plots of land located at the Kunia Substation were previously used for land application of radioactive material. In the first instance, an activity of approximately 10 millicuries (3.7E+8 becquerels) of a carbon-14 labeled compound was applied to a 3750 ft^2 (348 m^2) plot during 1984. This plot was decommissioned, and the NRC released the property from the license in May 1993. In the second instance, on two occasions (1979 and 1982), seeds treated with a carbon-14 compound were planted in a 1600 ft^2 (149 m^2) plot. This plot was also decommissioned, and the NRC released the property from the license in April 1996. No incidences involving spills or releases of radioactive material were documented to have occurred at Kunia Substation.

Environmental Impacts of the Alternatives to the Proposed Action: The licensee seeks NRC approval of the amendment request. The alternatives to the proposed action are: (1) The no-action alternative, or (2) to deny the amendment request and require the licensee to take some alternate action.

1. *No-Action Alternative:* One alternative available to the NRC is to take no action by denying the amendment request. The no-action alternative is not feasible because it conflicts with the NRC's Timeliness Rule (10 CFR 30.36) which requires licensees to decommission their facilities when licensed activities cease.

2. *Environmental Impacts of Alternative 2:* A second alternative is to deny the licensee's request in favor of alternate release criteria as allowed by § 20.1403 (criteria for restricted use) or § 20.1404 (alternate release criteria). However, the NRC's analysis of the final status survey data confirmed that the survey results and dose modeling meet the § 20.1402 radiological criteria for unrestricted use, which is the preferred alternative.

Accordingly, the NRC has determined that the second alternative is not reasonable, and this alternative action is eliminated from further consideration.

Conclusion: Based on its review, the NRC staff concludes that the environmental impacts associated with the proposed action do not warrant denial of the license amendment request. The staff finds that the proposed action will result in no significant environmental impacts. The staff has determined that approval of the license amendment is the appropriate alternative for selection.

Agencies and Persons Contacted: The NRC staff did not consult with the Hawaii State Historic Preservation Officer or the local U.S. Fish & Wildlife Service because licensed activities being considered by this EA occurred only within the confines of the Kunia Substation. Other than the two land applications that were previously reviewed and released by the NRC, no other use or release of radioactive material outside of the building was identified. Accordingly, there were no identified impacts to the cultural resources, endangered species, or critical habitats. The Hawaii Department of Health was consulted about this EA. The State informed the NRC by letter dated May 30, 2006, that it had no objections to the draft EA or to the use of the EA for NRC decisionmaking.

III. Finding of No Significant Impact

The NRC staff has prepared an EA in support of the proposed license amendment to release Kunia Substation for unrestricted use. On the basis of this EA, NRC has concluded that no significant environmental impacts will result from the proposed action, and the license amendment does not warrant the preparation of an environmental impact statement. Accordingly, it has been determined that a Finding of No Significant Impact is appropriate.

IV. Further Information

Documents related to this action, including the application for amendment and supporting documentation, are available electronically at the NRC's Electronic Reading Room at *http://www.nrc.gov/reading-rm/adams.html*. From this site, you can access the NRC's Agencywide Document Access and Management System (ADAMS), which provides text and image files of NRC's public documents. The ADAMS accession numbers for the documents related to this notice are:

1. Whalen, Stephanie, Hawaii Agriculture Research Center, Response to NRC Information Notice 96–47, October 31, 1996 (ML060890606).
2. NRC, ''Generic Environmental Impact Statement in Support of Rulemaking on Radiological Criteria for License Termination of NRC-Licensed Nuclear Facilities,'' NUREG–1496, July 1997 (ML042310492, ML042320379, and ML042330385).
3. NRC, ''Consolidated NMSS Decommissioning Guidance,'' NUREG–1757, Volume 1, Revision 1, September 2003 (ML053260027).
4. Whalen, Stephanie A., Hawaii Agriculture Research Center, License Amendment Request, December 2, 2005 (ML060120252).
5. Takata, Russell, S., Response to Request for Comments on Draft Environmental Assessment for Decommissioning of Kunia Substation at Hawaii Agriculture Research Center, May 30, 2006 (ML061630274).

If you do not have access to ADAMS or if there are problems in accessing the documents located in ADAMS, contact the NRC Public Document Room (PDR) Reference staff at 1–800–397–4209, 301–415–4737, or by e-mail to *pdr@nrc.gov*.

These documents may also be viewed electronically on the public computers located at the NRC's PDR, O 1 F21, One White Flint North, 11555 Rockville Pike, Rockville, MD 20852. The PDR reproduction contractor will copy documents for a fee.

Dated at Arlington, Texas this 16th day of June 2006.

For the Nuclear Regulatory Commission.

D. Blair Spitzberg,

Chief, Fuel Cycle & Decommissioning Branch, Division of Nuclear Materials Safety, Region IV.

[FR Doc. E6–10265 Filed 6–28–06; 8:45 am]

BILLING CODE 7590–01–P

NUCLEAR REGULATORY COMMISSION

[Docket No. 70–0036]

Notice of Availability of Environmental Assessment and Finding of No Significant Impact Related to Issuance of Amendment No. 52 to Materials License No. SNM–00033, Westinghouse Electric Company, LLC Hematite Former Fuel Fabrication Facility Located in Festus, MO, Site (TAC No. L52641)

AGENCY: U.S. Nuclear Regulatory Commission.

ACTION: Notice of Availability of Environmental Assessment and Finding of No Significant Impact.

FOR FURTHER INFORMATION CONTACT: Amy M. Snyder, Senior Project Manager, Decommissioning Directorate, Division of Waste Management and Environmental Protection, Office of Nuclear Material Safety and Safeguards, U.S. Nuclear Regulatory Commission, M.S. T7 E–18, Rockville, MD, 20852–2738. Telephone: (301) 415–8580; Fax number: (301) 415–5398; e-mail: *ams3@nrc.gov*.

SUPPLEMENTARY INFORMATION:

I. Introduction

The U.S. Nuclear Regulatory Commission (NRC) is considering amending Nuclear Materials License Number SNM–00033 issued to Westinghouse Electric Company, LLC (WEC) to authorize the dismantlement and demolition of Buildings 101, 110, 115, 120, 230, 231, 235, 240, 245, 252, 253, 254, 255, 256, 260, and 261 down to building slabs and foundations at grade at the WEC Hematite Former Fuel Fabrication Facility in Festus, Missouri. This consideration is being supported by this Environmental Assessment (EA) and a separate Safety Evaluation Report (SER). In a letter dated October 5, 2004 (ML042860234), WEC submitted a request to NRC to amend Materials License Number SNM–00033 to obtain authorization to dismantle and demolish Buildings 101, 110, 115, 120, 230, 231, 235, 240, 245, 252, 253, 254, 255, 256, 260, and 261 down to building slabs and foundations at grade. In its request, WEC noted that it wants the flexibility to not demolish all the non-process buildings, if it later decides to keep these buildings for reuse. The licensee's October 5, 2004, license amendment request (ML051310063) was noticed in the **Federal Register** on November 16, 2004 (69 FR 67187). That **Federal Register** notice also provided an opportunity for a hearing on this licensing action, and no hearing requests were submitted. NRC has prepared this EA in support of its consideration of the amendment request and in accordance with the requirements of 10 CFR part 51. This EA evaluates the potential environmental impacts of WEC's request. Based on this EA, the staff has concluded that a Finding of No Significant Impact (FONSI) is appropriate.

II. Environmental Assessment

Background

From the mid 1950s until 2001, the Hematite site was involved in production and manufacturing of nuclear fuel. The majority of the buildings were constructed during 1956 through 1974 with final construction in 1989. There are currently no fuel manufacturing activities at the site. Building 101 (Tile Barn) housed the former Emergency Operations Center during plant operations and was later used for the storage of both clean and contaminated equipment. Building 110 houses the security and some administrative office spaces. Building 115 housed the plant diesel emergency generator and fire pumps. Building 120 (Wood Barn) was used for storing both clean and contaminated equipment. Building 230 was used for the fuel assembly operations. The building surfaces have no known levels of contamination above the level for unrestricted use. Building 230 currently houses administrative offices. Building 231 was used as a warehouse to store shipping containers. Building 235 was used as a vault to store depleted, natural, and enriched uranium. Building 240 contained a laboratory and maintenance area, a recycle recovery area, and a waste incinerator. Past operations in this building also included the conversion of high enriched uranium using a wet conversion process and recovery. A portion of the building was used for recycle and recovery operations and high-enriched material operations. Another portion of the building was used for the incinerator and housed low-enriched powder operations, including ammonium diurinate and oxidation/reduction furnaces. Building 245 (Well House) was used for treating

potable water by chlorination. Building 252 (South Vault) is a reinforced concrete structure with six bays and was used for storage of low-enriched uranium. Building 253 contains offices, various site utilities, a former uranium storage facility, former processing areas and decontamination facilities. Contained within Building 253 is Building 250, which was formerly a stand-alone structure. Building 250 became room 250–1, and in 1958, rooms 250–2 and 250–3 were added to Building 250. Building 250 was used for the storage of fuel feed stock. Nuclear fuel was manufactured in Buildings 254 (Pellet Plant) and 255 (Erbia Plant). Buildings 256–1 (Pellet Drying) was initially used for a warehouse space and later was used for pellet drying. Building 256–2 (Workhouse) was used as the main warehouse for shipping pellets and receiving supply. Building 260 was used for a conversion process. Building 261 was used for storage of unused limestone and contained a preheat furnace.

Since there is known contamination under the process buildings and the licensee has not yet characterized the soil under the process and non-process buildings, the licensee will not be able to release the non-process buildings that it does not demolish under this proposed licensing action for unrestricted use. Furthermore, building foundation and subsurface soil removal are not covered under this proposed licensing action nor the current license.

In accordance with a previously issued amendment to Materials License Number SNM–00033, the licensee has been performing limited decommissioning for the purpose of reducing residual radioactivity and other industrial contaminants from internal building equipment and components for the process buildings. WEC completed this work in March 2006. The NRC performed an EA, using NUREG–1748 as guidance, to evaluate these limited decommissioning activities. The EA and associated SER for limited decommissioning of the equipment and materials in the buildings, waste removal, and limited site characterization activities form the basis for NRC granting license amendment 42 to Materials License Number SNM–00033. In addition, WEC has produced an engineering evaluation/cost analysis and a work plan to comply with Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA) for the building demolition. These documents can be found on the Missouri Department of Natural Resources (MDNR) Web site at *http://www.mdnr.mo.gov.* In addition, WEC has made these documents available at the Festus, Missouri Public Library.

The radioactive contamination at WEC's Hematite, Missouri site consists of soils, and building and equipment surfaces contaminated with uranium, fission products, and by-product material from licensed operations that occurred from the mid 1950s until 2001. The groundwater is contaminated with uranium, technicium, and volatile organic compounds (VOCs). At this point in time, only the VOCs in the groundwater have migrated offsite. Remediation of this groundwater contamination will be the subject of a separate NRC action that addresses subsurface remediation.

As stated above, WEC submitted a request to NRC in 2004 for authorization to dismantle and demolish designated buildings at its site. By letters dated June 28, 2005 (ML051720051), December 23, 2005 (ML053330179), and March 2, 2006 (ML06540109), the NRC staff transmitted requests for additional information (RAIs) related to the proposed building demolition and dismantlement. In letters dated July 22, 2005 (ML052140426), January 31, 2006 (ML060330438) and March 17, 2006 (ML060800265), WEC responded to the RAIs. NRC found these responses to the RAIs acceptable.

Site Local and Physical Description

The WEC Hematite site is located approximately ¾ of a mile northeast of the unincorporated town of Hematite and approximately 35 miles south of the City of St. Louis, Missouri. The site is primarily surrounded by suburban and residential communities in Jefferson County, Missouri. Jefferson County is predominantly rural and characterized by rolling hills with many sizeable woodland tracts. The land area is classified as 51% forest, 33% agricultural, and approximately 16% urban, suburban, commercial, and unused or undeveloped. The primary land within a five-mile radius of the facility consists of deciduous forest, pasture and residential areas. Residential land use is centered in the communities of Festus/Crystal City to the northeast, Horine to the north, and Hillsboro to the northwest. Other land uses include row crop and urban/residential. Land use classifications are based on the National Land Cover Dataset. The plant facilities are located on a central site tract of approximately 10 to 20 acres. The entire site is approximately 220 acres. Much of the northern portion of the property is wooded. Surface water bodies on the site include the East Lake, located on the eastern end of the site, the Site Pond, located west of the site buildings, Joachim Creek along the southern site boundary, Northeast Site Creek and Site Creek. The Hematite facility is located on the north, northeast flank of the Precambrian age St. Francis Mountains uplift, which created the Ozark Dome. A full description of the site and its characteristics is provided in the WEC Environmental Report for Building Demolition at the Hematite Facility which was submitted in conjunction with the license amendment request for dismantlement and demolition of the buildings. The nearby community of Hematite has expressed interest in future development of the site. However, as of April 2006, no definite future plans have been developed for the site.

Regulatory Requirements

10 CFR part 70, ''Domestic Licensing of Special Nuclear Material'' applies to the decommissioning of the Hematite Former Fuel Fabrication Facility. Termination of licenses and decommissioning are addressed in § 70.38. However, this proposed action will not result in license termination. It will only address building demolition. Financial assurance requirements are found in § 70.25 and 70.38. Completeness and accuracy of the radiation safety records and information provided to NRC are addressed in § 70.9. Section 2.1205 discusses the public's opportunities to request hearings on licensing actions. 10 CFR part 20, subpart E, sets forth radiological criteria for license termination in § 20.1402, 20.1403, and 20.1404. The requirements for final status surveys are contained in § 20.1501(a); 10 CFR part 51, ''Environmental Protection Regulations for Domestic Licensing and Related Regulatory Functions,'' and 10 CFR part 71, ''Packaging and Transportation of Radioactive Material'' (part 71 requires that licensees or applicants who transport licensed material, or who may offer such material to a carrier for transportation, must comply with the applicable requirements of the Department of Transportation that are found in 49 CFR parts 170 through 189).

The Proposed Action

The proposed action is to amend NRC Materials License Number SNM–00033 to allow the dismantlement and demolition of the buildings 101, 110, 115, 120, 230, 231, 235, 240, 245, 252, 253, 254, 255, 256, 260, and 261 down to building slabs and foundations at grade. No work will be performed on sub-grade soil, the building slabs/

foundations, or sub-grade structures and systems. WEC states in its application that the demolition of concrete buildings will be performed as determined by an engineering evaluation. WEC plans to perform an engineering evaluation of the demolition of the concrete masonry unit (CMU) structures and concrete buildings, and use dismantlement and demolition techniques, such as cutting and shearing to demolish the buildings. Manual jack-hammers, equipment mounted jack-hammers (hoe ram), skid-steer loader, or shears will be used to remove/dismantle and to size reduce concrete or CMU structures. The CMU walls may also be brought down using pushover techniques. Steel reinforcement bars will be torch-cut, sheared, or saw-cut as required for dismantlement, leveling, or size reduction purposes. The only potential waste streams from the facility will result from the building dismantlement and demolition process. Wastes that are anticipated are: (1) Debris; (2) dust; (3) rubble and (4) water. Based on characterization data, WEC proposes to segregate and analyze the waste as required by the disposal facility site's waste acceptance criteria. WEC proposes that debris will be characterized, and will meet free release criteria for radiological and hazardous contamination, and will be shipped to an approved waste disposal facility for disposal. If the debris does not meet free release criteria, then it will be packaged accordingly and shipped to an approved waste disposal facility for disposal.

Need for the Proposed Action

The NRC regulations require licensees to begin timely decommissioning of their sites, or any separate buildings, that contain residual radioactivity, upon cessation of licensed operations, in accordance with § 70.38(d). The purpose of the proposed action is to reduce residual radioactivity at WEC's Hematite site. Additionally, although no definite future use plans have been developed for the site at this time, due to potential commercial value of the site property, the licensee plans to eventually return the land to unrestricted use in accordance with § 20.1402. The proposed licensing action is a step toward this goal. If this proposed licensing action is not granted, the licensee will not be able to fully address surface and subsurface contamination under buildings, which will prolong the overall cleanup of the site. The NRC is fulfilling its responsibilities under the Atomic Energy Act, as amended, and the National Environmental Policy Act to make a decision on this proposed license amendment for building dismantlement and demolition that will ensure adequate protection of the public health, safety and the environment.

Alternatives to the Proposed Action

The proposed action is to decontaminate the buildings with dismantlement and demolition down to building slabs and foundations at grade. There are three alternatives to the proposed action of dismantlement and demolition of the buildings: (1) To take no further action; (2) to decontaminate the buildings without dismantlement and demolition; and (3) to decontaminate the buildings with dismantlement and demolition to include removal of the slabs and foundations. Alternative one, the no-action alternative, is not consistent with § 70.38(d), requiring that decommissioning of special nuclear material facilities be completed and approved by the NRC after licensed activities cease. The no-action alternative would keep radioactive material on site without disposal. The second alternative would involve maintaining the buildings on site due to known and potential subsurface soil contamination under the process building. This would provide negligible, if any, environmental benefit and would greatly reduce options for future unrestricted use of the site. Alternative 3 would result in exposing the subsurface contamination, that was contained under the buildings, to the open environment. Specifically, exposing the subsurface would expose workers and visitors to radiological and potential non-radiological hazards in the subsurface soil. As discussed earlier, the licensee has not yet fully evaluated the subsurface contamination under the buildings. Potentially contaminated materials could be released into the surrounding environment via effluents or airborne particles. Shipping the subsurface contaminated material off-site for disposal could also potentially expose workers and others to the material before, during, and after shipment to a waste disposal facility. The environmental impact could potentially put workers and the surrounding environment at risk, and therefore, is not an environmentally sound option at this time. Therefore, these alternatives are not considered to be reasonable and are not analyzed further in the EA.

The licensee's proposed action is described in detail in the proposed building dismantlement and demolition license amendment application. This action is preferred over the alternative actions because the proposed action has little, if any, impact on the environment. Once the buildings are dismantled and demolished down to the slabs and foundations at grade, all radiological materials will be confined to either the slabs and foundations or the subsurface.

Environmental Impacts of the Proposed Action

The NRC staff has reviewed the license amendment request for the WEC facility in Hematite and examined the impacts of this license amendment request. Potential impacts include impacts to water resources (*e.g.*, water may be used for dust control), impacts to air quality from dust emissions, temporary impacts to local traffic resulting from transporting the building debris offsite, beneficial local economic effects due to the creation of jobs to perform dismantlement and demolition, dose impacts, noise impacts from equipment operation, scenic quality impacts, and waste management impacts. There may be minor impacts to surface water resources at the Hematite facility as a result of water runoff that could occur during the building dismantlement and demolition process. According to the licensee's amendment request, the runoff, whether as a result of natural precipitation or from water used to control fugitive dust emission, will be managed by WEC Hematite erosion and sediment control management plan. Any discharge will be in compliance with Material License Number SNM–00033 and the WEC Hematite National Pollutant Discharge Elimination System (NPDES) permit issued and managed by the State of Missouri. There will be no significant surface and no subsurface soil disturbances as the buildings will be removed down to the grade and concrete slab level. There are no flood plains or wetlands present within the central site tract where the building demolition will take place. The central site tract soil consists primarily of relatively impermeable soil. WEC has committed to using best practices to manage all potential impacts during building dismantlement and demolition. Overall, it is anticipated that there will be no significant impact on surface water or groundwater.

Additionally, the staff has determined that significant air quality, noise, land use, economic and off-site radiation exposure impacts are not expected. No significant air quality impacts are anticipated because of the contamination controls and dust suppression techniques that will be implemented by WEC during building dismantlement and demolition. WEC license amendment request describes

the work to be performed and its strategy for controlling radiation diffuse emissions and discharge. WEC has committed to have procedures for performing building dismantlement and demolition that will include guidance for controlling emissions and run-off. The staff determined that no significant economic impact will result from the creation of jobs to perform dismantlement and demolition because the work should take a small amount of time to complete.

The staff evaluated the temporary local traffic impacts resulting from transporting the building debris and wastes offsite due to the licensee's proposed request. WEC ceased fuel production operations at the Hematite Facility and has no future plans for operating the site as a nuclear fuel processing facility. WEC states that clean debris will be containerized, transported, and disposed of at a licensed facility. The risk to human health from the transportation of all radioactive material in the U.S. was evaluated in NUREG–0170, ''Final Environmental Statement on the Transportation of Radioactive Materials by Air and Other Modes.'' The principal radiological environmental impact during normal transportation is minimal direct radiation exposure to transport workers and nearby persons from radioactive material in the package. The average annual individual dose from all radioactive material transportation in the U.S. was calculated as approximately 0.5 mrem per year, well below the § 20.1301 limit of 100 mrem per year for a member of the public. WEC estimates that 2 to 3 truck loads of demolition waste will leave the site per working day compared to an average daily traffic flow of approximately 2,570 vehicles per day (2002 data) on State Route P. The trucks will then travel on State Route A, a two-lane rural/suburban highway which connects to State Route P approximately 2 miles east of the site. State Route A enters the western edge of Festus, Missouri. Interstate 55, a major north-south freeway, is located approximately 3.5 miles east of the site and intersects with State Route A in Festus, Missouri. This four-lane interstate freeway connects to Interstate Highways 270, 44, and 70 in the St. Louis, Missouri area, approximately 35 miles north of the site. The annual average daily traffic count for I–55 near Festus was 35,347 vehicles per day (2002 data). There are no public transit systems, such as bus or light rail available in the immediate vicinity of the site. The trucks, once entering the above Interstate Highways, will then travel to their intended destinations. Based on the Environmental Report for Building Demolition at the Hematite Facility, the licensee states that it anticipates that debris from the dismantled buildings would likely be transported by truck to the Envirocare Facility in Clive, Utah or to the Radiological Assistance, Consulting and Engineering (RACE) Facility in Memphis, Tennessee. The proposed transportation of waste from the building, dismantlement, and demolition is not anticipated to result in significant impacts.

Monitoring

The license amendment request submitted by WEC described the effluent/environmental monitoring that will take place during building dismantlement and demolition. This description included not only the routine effluent/environmental monitoring program that WEC presently has in place, but also that additional air monitoring (local demolition project-specific perimeter air monitors) shall be performed during the demolition activities.

Work activities are not anticipated to result in radiation exposures to individual members of the public in excess of ten percent of the § 20.1301 limits. However, WEC's environmental monitoring program must implement the requirements of its Radioactive Materials License, Chapter 3, Radiation Protection, and Chapter 5, Environmental Protection. WEC has acknowledged that building demolition activities will require that building stack monitoring be terminated and has committed to shift compliance monitoring to air monitoring devices located around the site to assure that all pathways for release of radioactive material are monitored. WEC has updated its technical basis for its Environmental Monitoring Program to address building dismantlement and demolition activities. Moreover, WEC has stated it will modify and supplement approved environmental monitoring plans, policies, and procedures that support the license, before and during the proposed work, as necessary, to support building dismantlement and demolition.

Perimeter monitors to measure air borne radiation levels are to be established as close to the demolition activities as possible and again at the boundary of the work area. Currently, three onsite remote air monitoring samples are collected continuously and the results are analyzed weekly. During the demolition activities, the licensee has committed to use a minimum of three area monitors. The locations for the air samplers will be chosen considering meteorological conditions relative to the dismantlement and demolition activities to ensure that maximum airborne concentrations are collected. The air sampling data will be used by WEC to demonstrate that any effluent from the proposed building dismantlement and demolition will be in accordance with 10 CFR part 20 requirements.

Additionally, WEC has indicated in its application that it will evaluate the existing building characterization data and pre-demolition characterization data for each building it plans to dismantle and/or demolish prior to building demolition to verify the radiological conditions and controls that WEC incorporated in implementing building demolition procedures remain appropriate.

On February 26, 2006, staff asked WEC additional questions regarding the radiological status of the buildings with respect to Nuclear Criticality Safety (NCS). Staff evaluated the data and determined that there is no NCS concern for the building demolition activities because the total residual mass of UO_2 in the buildings (i.e., 5 kg UO_2) is less than the favorable geometry mass limit in the license application (i.e., 16 kg UO_2). Also, NRC staff determined that the licensee is not required to have a criticality accident alarm system for building demolition because the conservative estimate of mass of U^{235} in the buildings (i.e., 250 grams U^{235}) is less than the action limit in § 70.24 (i.e., 700 grams of U^{235}). Thus, NRC has reasonable assurance of NCS during building demolition activities. Work activities are not anticipated to result in radiation exposures to individual members of the public in excess of ten percent of the § 20.1301 limits. In addition, the staff agrees that the Environmental Monitoring plan is appropriate for the proposed activities and it is not anticipated to result in significant impacts to public health, safety, and the environment.

Cumulative Impacts

The NRC has evaluated whether cumulative environmental impacts could result from an incremental impact of the proposed action when added to other past, present, or reasonably foreseeable future actions in the area. The proposed NRC approval of the License Amendment Request, when combined with known effects on resource areas at the site, including future further site remediation, are not anticipated to result in any cumulative impacts at the site.

Mitigation Measures

The license amendment request submitted by WEC contains mitigation measures to further ensure that the requested licensing action will not have any adverse environmental impact. WEC plans to implement procedural controls, such as the use of less aggressive dismantlement and demolition techniques, including cutting and shearing, to minimize the generation of fugitive emissions. Other engineering controls, including water sprays, will also be utilized to control fugitive emissions and visible dust, if needed. In addition, WEC has agreed to perform the mitigative measures that have been proposed by the Missouri State Historic Preservation Office (SHPO) regarding the historical impact of the proposed action. WEC will provide erosion and sediment control, as necessary, in accordance with best management practices, regulatory guidance, and good engineering practices. This will include structural features, stabilization, and storm water management. The controls may be temporary or permanent.

Agencies and Individuals Consulted

The NRC staff prepared a draft EA and sent it to the Missouri SHPO, by letter datedNovember 4, 2004, and the U.S. Fish and Wildlife Service (FWS), by letter dated November 9, 2004. The Missouri SHPO, in its response letter dated January 4, 2005, noted that ''In order for the project to move forward, it is acceptable to our office that Westinghouse and NRC proceed with the project, in accordance with the draft MOA (Memorandum of Agreement).'' The FWS, in its response letter dated December 10, 2004, indicated that ''our evaluation and search of existing information indicates no federally listed, proposed, or candidate species or critical habitat occurs on or near the project site. This fulfills your consultation requirements under section 7 of the Endangered Species Act of 1973, as amended''.

The staff provided a draft of this EA to the MDNR for review. In its letter dated April 20, 2005, which commented on draft EA, the MDNR responded by stating it agreed with the proposed alternative, but made no other comments about the draft EA. However, this letter from the MDNR also mentions the MNDR's January 2005 letter to WEC. The MDNR's letter to WEC identified concerns related to monitoring and mitigation. Staff addressed environmental monitoring concerns through the RAI process, noted above and found WEC's responses acceptable. The staff then developed a Final Draft of this EA and provided it to MDNR for its review and comment by letter dated April 28, 2006 (ML061170223). By letter dated, May 11, 2006, MDNR concurred with the conclusions in the Final Draft of this EA (ML061170282).

Conclusion

NRC has prepared this EA in support of the proposed license amendment to approve the building demolition and dismantlement of site buildings down to building slabs and foundations at grade at the Hematite Facility in Festus, MO. On the basis of the EA, NRC has concluded that the environmental impacts from the proposed action are not expected to be significant and has determined that preparation of an Environmental Impact Statement (EIS) is not needed for the proposed action. Approval of the license amendment will not cause significant impacts on the health and safety of the public or on the environment due to mitigation measures that WEC is committing to use. The NRC staff has concluded that radiological exposures to workers will be low and well within the limits specified in 10 CFR part 20. Dismantlement and demolition of the buildings, as proposed by the amendment request, will result in an overall reduction of radioactive material at the WEC Hematite which will reduce the long term potential for release of radiological contamination to the environment. No significant radiologically contaminated effluents are expected during building dismantlement and demolition. No significant effluent releases of radiological material or other releases are expected.

List of Preparers

This Environmental Assessment was prepared entirely by the following NRC staff:

Amy Snyder, Senior Project Manager, Decommissioning Directorate, Division of Waste Management and Environmental Protection, Office of Nuclear Material Safety and Safeguards (NMSS), Decommissioning Issues.

Alicia Mullins, Environmental Project Managers, Division of Waste Management and Environmental Protection, NMSS, Environmental Issues.

Sources Used

1. NRC Materials License No. SNM–00033.

2. WEC's October 5, 2004, license amendment request was noticed in the **Federal Register** on November 16, 2004 (69 FR 67187). This **Federal Register** notice also provided an opportunity for a hearing on this licensing action (See ADAMS Accession No. ML043000467).

3. The application for the license amendment and supporting documentation are available for review at the U.S. Nuclear Regulatory Commission's (NRC's) Public Electronic Reading Room at *http://www.nrc.gov/reading-rm/adams.html.* (See ADAMS Accession No. ML042860234, ML042880279, and ML050250347).

4. NUREG–0170, 1977. Final Environmental Impact Statement on the Transportation of Radioactive Material by Air and Other Modes, U.S. Nuclear Regulatory Commission, Washington, DC.

5. NUREG–0586, 1988. Final Generic Environmental Impact Statement on the Decommissioning of Nuclear Facilities, U.S. Nuclear Regulatory Commission, Washington, DC.

6. NUREG–1496, 1977. Generic Environmental Impact Statement in Support of Rulemaking on Radiological Criteria for License Termination of NRC-Licensed Nuclear Facilities Nuclear Regulatory Commission, Washington, DC, July.

7. NUREG–1748, 2003. Environmental Review Guidance for Licensing Actions Associated with NMSS Programs Nuclear Regulatory Commission, Washington, DC, August.

8. REGULATORY GUIDE–1.86, 1974. Termination of Operating Licenses for Nuclear Reactors, Nuclear Regulatory Commission, Washington, DC, June.

9. NRC letter to Missouri Historic Preservation Office, to Allison Dubbert from Amir Kouhestani, dated November 4, 2004 (ML043070004).

10. U.S. Fish and Wildlife Services letter to Amir Kouhestani, dated November 11, 2004 (ML043520384).

11. WEC, January 4, 2005. ''Demolition Permit Application for Demolition of the Buildings'', Jefferson County Building Commission, Hillsboro, Missouri.

12. State of Missouri Department of Natural Resources, letter to Amir Kouhestani from Mark A. Miles, dated January 4, 2005 (ML050130140).

13. Asbestos Abatement Registration Form for WEC filed with the Missouri Department of Public Health.

14. State of Missouri Department of Natural Resources, letter to Amir Kouhestani from Ben L. Moore, dated January 18, 2005, (ML050310161).

15. State of Missouri Department of Natural Resources, letter to Henry A. Sepp, dated January 18, 2005 (ML050310182).

16. NRC Draft EA, letter to Honorable Doyle Childers, dated March 2, 2005.

17. State of Missouri Department of Natural Resources, letter to Daniel Gillen from Doyle Childers, dated April 20, 2005.

18. United States Department of the Interior, Fish and Wildlife Services, letter to Amir Kouhestani from Charles M. Scott, dated December 10, 2004 (ML043520384).

19. NRC, RAI letters to WEC, dated June 28, 2005 (ML051720051), December 23, 2005 (ML053330179), and March 2, 2006 (ML060540109).

20. WEC, Response to RAI letters to NRC, dated July 22, 2005 (ML052140426), January 31, 2006 [ML060330438], and March 17, 2006 (ML060800265).

21. WEC, Submittal of Technical Report to NRC, DO–05–001, Environmental Report for

Hematite Site Decommissioning, dated August 31, 2005 (ML052580255).

22. NRC, Final Draft EA letter to State of Missouri Department of Natural Resources, to Ben Moore, from Amy M. Snyder, letter dated April 28, 2006 (ML061170223).

23. State of Missouri Department of Natural Resources, letter to Amy M. Snyder from Ben L. Moore, dated May 11, 2006 (ML061560372).

III. Finding of No Significant Impact

On the basis of this EA, NRC has concluded that there are no significant environmental impacts and the license amendment does not warrant the preparation of an EIS. Accordingly, it has been determined that a FONSI is appropriate.

IV. Further Information

Documents related to this action, including the application for amendment and supporting documentation, are available electronically at the NRC's Electronic Reading Room at *http://www.nrc.gov/reading-rm/adams.html*. From this site, you can access the NRC's Agencywide Document Access and Management System (ADAMS), which provides text and image files of NRC's public documents.

If you do not have access to ADAMS or if there are problems in accessing the documents located in ADAMS, contact the NRC's Public Document Room (PDR) Reference staff at 1–800–397–4209, 301–415–4737, or by e-mail to *pdr@nrc.gov*. These documents may also be viewed electronically on the public computers located at the NRC's PDR, O–1F21, One White Flint North, 11555 Rockville Pike, Rockville, MD 20852. The PDR reproduction contractor will copy documents for a fee.

Dated at Rockville, Maryland this 14th day of June 2006.

For the Nuclear Regulatory Commission.

Andrew Persinko,

Acting Deputy Director, Decommissioning Directorate, Division of Waste Management and Environmental Protection, Office of Nuclear Material Safety and Safeguards.

[FR Doc. E6–10267 Filed 6–28–06; 8:45 am]

BILLING CODE 7590–01–P

OFFICE OF THE UNITED STATES TRADE REPRESENTATIVE

Generalized System of Preferences (GSP): Notice Regarding the Initiation of the 2006 Annual GSP Product and Country Eligibility Practices Review and Change in Deadlines for Filing Certain Petitions

AGENCY: Office of the United States Trade Representative.

ACTION: Notice and solicitation for public petition.

SUMMARY: This notice announces that the Office of the United States Trade Representative (USTR) will receive petitions in 2006 to modify the list of products that are eligible for duty-free treatment under the GSP program, and to modify the GSP status of certain GSP beneficiary developing countries because of country practices. This notice further determines that the deadline for submission of product petitions, other than those requesting competitive need limitation (CNL) waivers, and country practice petitions for the 2006 Annual GSP Product and Country Eligibility Practices Review is 5 p.m., July 20, 2006. The deadline for submission of product petitions requesting CNL waivers is 5 p.m., November 17, 2006. The list of product petitions and country practice petitions accepted for review will be announced in the **Federal Register** at later dates.

FOR FURTHER INFORMATION CONTACT: Contact the GSP Subcommittee of the Trade Policy Staff Committee, Office of the United States Trade Representative, 1724 F Street, NW., Room F–220, Washington, DC 20508. The telephone number is (202) 395–6971, the facsimile number is (202) 395–9481, and the e-mail address is *FR0618@USTR.GOV*. Public versions of all documents relating to this Review will be available for examination approximately 30 days after the pertinent due date, by appointment, in the USTR public reading room, 1724 F Street, NW., Washington, DC. Availability of documents may be ascertained, and appointments may be made from 9:30 a.m. to noon and 1 p.m. to 4 p.m., Monday through Friday, by calling (202) 395–6186.

2006 Annual GSP Review

The GSP regulations (15 CFR part 2007) provide the schedule of dates for conducting an annual review, unless otherwise specified by **Federal Register** notice. Notice is hereby given that, in order to be considered in the 2006 Annual GSP Product and Country Eligibility Practices Review, all petitions to modify the list of articles eligible for duty-free treatment under GSP or to review the GSP status of any beneficiary developing country, with the exception of petitions requesting CNL waivers, must be received by the GSP Subcommittee of the Trade Policy Staff Committee no later than 5 p.m. on July 20, 2006. Petitions requesting CNL waivers must be received by the GSP Subcommittee of the Trade Policy Staff Committee no later than 5 p.m. on November 17, 2006 in order to be considered in the 2006 Annual Review. Petitions submitted after the respective deadlines will not be considered for review.

Interested parties, including foreign governments, may submit petitions to: (1) Designate additional articles as eligible for GSP benefits, including to designate articles as eligible for GSP benefits only for countries designated as least-developed beneficiary developing countries, or only for countries designated as beneficiary sub-Saharan African countries under the African Growth and Opportunity Act (AGOA); (2) withdraw, suspend or limit the application of duty-free treatment accorded under the GSP with respect to any article, either for all beneficiary developing countries, least-developed beneficiary developing countries or beneficiary sub-Saharan African countries, or for any of these countries individually; (3) waive the ''competitive need limitations'' for individual beneficiary developing countries with respect to specific GSP-eligible articles (these limits do not apply to either least-developed beneficiary developing countries or beneficiary sub-Saharan African countries); and (4) otherwise modify GSP coverage. As specified in 15 CFR 2007.1, all product petitions must include a detailed description of the product and the subheading of the Harmonized Tariff Schedule of the United States (HTSUS) under which the product is classified. Product petitions requesting CNL waivers for GSP-eligible articles from beneficiary developing countries that exceed the CNLs in 2006 must be filed in the 2006 Annual Review. In order to allow petitioners an opportunity to review additional 2006 export data, these petitions may be filed after June 30, 2006, but must be received on or before the November 17, 2006, deadline described above in order to be considered in the 2006 Annual Review. Copies will be made available for public inspection after the November 17, 2006, deadline.

Any person may also submit petitions to review the designation of any beneficiary developing country, including any least-developed beneficiary developing country, with respect to any of the designation criteria listed in sections 502(b) or 502(c) of the Trade Act (19 U.S.C. 2462(b) and (c)) (petitions to review the designation of beneficiary sub-Saharan African countries are considered in the Annual Review of the AGOA, a separate administrative process not governed by the GSP regulations). Such petitions must comply with the requirements of 15 CFR 2007.0(b).

Requirements for Submissions

All such submissions must conform to the GSP regulations set forth at 15 CFR part 2007, except as modified below. These regulations are reprinted in ''A Guide to the U.S. Generalized System of Preferences (GSP)'' (May 2006) (''GSP Guidebook''), available at *http://www.ustr.gov/assets/Trade_Development/Preference_Programs/GSP/asset_upload_file890_8359.pdf.*

Any person or party making a submission is strongly advised to review the GSP regulations. Submissions that do not provide the information required by sections 2007.0 and 2007.1 of the GSP regulations will not be accepted for review, except upon a detailed showing in the submission that the petitioner made a good faith effort to obtain the information required. Petitions with respect to waivers of the ''competitive need limitations'' must meet the information requirements for product addition requests in section 2007.1(c) of the GSP regulations. A model petition format is available from the GSP Subcommittee and is included in the GSP Guidebook. Petitioners are requested to use this model petition format so as to ensure that all information requirements are met. Furthermore, interested parties submitting petitions that request action with respect to specific products should list on the first page of the petition the following information after typing ''2006 Annual GSP Review'': (1) The requested action; (2) the HTSUS subheading in which the product is classified; and (3) if applicable, the beneficiary developing country. Petitions and requests must be submitted, in English, to the Chairman of the GSP Subcommittee, Trade Policy Staff Committee. Submissions in response to this notice will be available for public inspection by appointment with the staff of the USTR Public Reading Room, except for information granted ''business confidential'' status pursuant to 15 CFR 2003.6. If the submission contains business confidential information, a non-confidential version of the submission must also be submitted that indicates where confidential information was redacted by inserting asterisks where material was deleted. In addition, the confidential submission must be clearly marked ''BUSINESS CONFIDENTIAL'' in large, bold letters at the top and bottom of each and every page of the document. The public version that does not contain business confidential information must also be clearly marked in large, bold letters at the top and bottom of each and every page (either ''PUBLIC VERSION'' or ''NON-CONFIDENTIAL''). Documents that are submitted without any marking might not be accepted or will be considered public documents.

In order to facilitate prompt consideration of submissions, USTR requires electronic mail (e-mail) submissions in response to this notice. Hand-delivered submissions will not be accepted. E-mail submissions should be single copy transmissions in English with the total submission including attachments not to exceed 30 pages in 12-point type and 3 megabytes as a digital file attached to an e-mail transmission. Submissions should use the following e-mail subject line: ''2006 Annual GSP Review-Petition.'' Documents must be submitted as either WordPerfect (''.WPD''), MSWord (''.DOC''), or text (''.TXT'') file. Documents cannot be submitted as electronic image files or contain imbedded images (for example, ''.JPG'', ''.TIF'', ''.PDF'', ''.BMP'', or ''.GIF'') as these type files are generally excessively large. E-mail submissions containing such files will not be accepted. Supporting documentation submitted as spreadsheets are acceptable as Quattro Pro or Excel, pre-formatted for printing on 8½ x 11 inch paper. To the extent possible, any data attachments to the submission should be included in the same file as the submission itself, and not as separate files. E-mail submissions should not include separate cover letters or messages in the message area of the e-mail; information that might appear in any cover letter should be included directly in the attached file containing the submission itself, including identifying information on the sender, including sender's e-mail address. The electronic mail address for these submissions is *FR0618@USTR.GOV.*

For any document containing business confidential information submitted as an electronic attached file to an e-mail transmission, in addition to the proper marking at the top and bottom of each page as previously specified, the file name of the business confidential version should begin with the characters ''BC-'', and the file name of the public version should begin with the characters ''P-''. The ''P-'' or ''BC-'' should be followed by the name of the person or party (government, company, union, association, etc.) submitting the petition.

Documents not submitted in accordance with the GSP regulations as modified by these instructions will not be considered in this review.

Marideth Sandler,

Executive Director GSP, Chairman, GSP Subcommittee of the Trade Policy Staff Committee.

[FR Doc. 06–5827 Filed 6–28–06; 8:45 am]

BILLING CODE 3190–W6–P

SECURITIES AND EXCHANGE COMMISSION

Sunshine Act Meeting Notice

FEDERAL REGISTER CITATION OF PREVIOUS ANNOUNCEMENT: 71 FR 36569, June 27, 2006.

STATUS: Closed Meeting.

PLACE: 100 F Street, NE., Washington, DC.

DATE AND TIME OF PREVIOUSLY ANNOUNCED MEETING: Thursday, June 29, 2006 at 2 p.m.

CHANGE IN THE MEETING: Time Change.

The Closed Meeting scheduled for Thursday, June 29, 2006 at 2 p.m. has been changed to Thursday, June 29, 2006 at 1 p.m.

At times, changes in Commission priorities require alterations in the scheduling of meeting items. For further information and to ascertain what, if any, matters have been added, deleted or postponed, please contact the Office of the Secretary at (202) 551–5400.

Dated: June 27, 2006.

Nancy M. Morris,

Secretary.

[FR Doc. 06–5903 Filed 6–27–06; 10:51 am]

BILLING CODE 8010–01–P

SECURITIES AND EXCHANGE COMMISSION

[File No. 500–1]

In the Matter of Rudy 45; Order of Suspension of Trading

June 26, 2006.

It appears to the Securities and Exchange Commission that there is a lack of current and accurate information concerning the securities of Rudy 45 (''RDYF'') because the company has failed to make required periodic corporate filings and/or has made inadequate or incomplete periodic corporate filings since December 2004, because of questions raised regarding the accuracy and adequacy of publicly disseminated information concerning, among other things, an acquisition announced by Rudy 45, and because of possible manipulative conduct

occurring in the market for the company's stock.

The Commission is of the opinion that the public interest and the protection of investors require a suspension of trading in the securities of the above-listed company.

Therefore, it is ordered, pursuant to Section 12(k) of the Securities Exchange Act of 1934, that trading in the above-listed company is suspended for the period from 9:30 a.m. EDT, on June 26, 2006 through 11:59 p.m. EDT, on July 10, 2006.

By the Commission.

Nancy M. Morris,

Secretary.

[FR Doc. 06–5791 Filed 6–26–06; 11:51 am]

BILLING CODE 8010–01–P

SECURITIES AND EXCHANGE COMMISSION

[Release No. 34–54033; File No. SR–Amex–2005–105]

Self-Regulatory Organizations; American Stock Exchange LLC; Order Granting Approval of Proposed Rule Change and Amendments No. 1 and 2 Thereto Relating to the Listing and Trading of Principal Protected Notes Linked to the Metals-China Basket

June 22, 2006.

I. Introduction

On October 20, 2005, the American Stock Exchange LLC (''Amex'' or ''Exchange'') filed with the Securities and Exchange Commission (''Commission''), pursuant to section 19(b)(1) of the Securities Exchange Act of 1934 (''Act'')[1] and Rule 19b–4 thereunder,[2] a proposal to list and trade principal protected notes, the performance of which is linked to a basket comprised of an equal weighting of the FTSE/Xinhua China 25 Index (the ''China 25 Index'' or ''Index'') and futures contracts on the following four commodities: Copper, lead, nickel, and zinc (the ''Metals-China Basket'' or ''Basket''). On March 23, 2006, Amex filed Amendment No. 1 to the proposed rule change. On April 12, 2006, Amex filed Amendment No. 2 to the proposed rule change. The proposed rule change, as amended, was published for comment in the **Federal Register** on May 3, 2006.[3] The Commission received no comments regarding the proposal. This order approves the proposed rule change, as amended.

II. Description of the Proposal

Under Section 107A of the Amex Company Guide (''Company Guide''), the Exchange may approve for listing and trading securities that cannot be readily categorized under the listing criteria for common and preferred stocks, bonds, debentures, or warrants.[4] The Amex proposes to list for trading under Section 107A of the Company Guide principal protected notes linked to the performance of the Metals-China Basket (the ''Notes'').[5] Wachovia will issue the Notes under the name ''Asset Return Obligation Securities.'' The China 25 Index is determined, calculated and maintained solely by FXI while the commodity prices are determined by the cash settlement price of each respective commodity futures contract traded on the London Metals Exchange (the ''LME'').[6] The Notes will provide for participation in the positive performance of the Metals-China Basket during their term while reducing the risk exposure to investors through principal protection.

The Notes will conform to the initial listing guidelines under Section 107A[7] and continued listing guidelines under Sections 1001–1003[8] of the Company Guide. The Notes are senior non-convertible debt securities of Wachovia. The principal amount of each Note will be $1,000.[9] The Notes will have a term of at least one (1) but no more than ten (10) years.[10] At a minimum, the Notes will entitle the owner at maturity to receive at least 100% of the principal investment amount. At maturity, the holder would receive the full principal investment amount of each Note, plus the Basket Performance Amount. The Basket Performance Amount is the greater of zero and the product of $1,000 and the performance of the Basket as adjusted by the adjustment factor (the ''Adjustment Factor'').[11] Accordingly, if the performance of the Metals-China Basket is negative or does not appreciate by greater than 7.2341% as of the fifth business day (the ''Valuation Date''), a holder will nevertheless receive the principal investment amount of the Note at maturity. The Notes are not callable by the Issuer.

The payment that a holder or investor of a Note will be entitled to receive (the ''Maturity Payment Amount'') will depend on the performance of the Metals-China Basket during the term of the Note. The Metals-China Basket will not be managed and will remain static

[1] 15 U.S.C. 78s(b)(1).

[2] 17 CFR 240.19b–4.

[3] *See* Securities Exchange Act Release No. 53723 (April 25, 2006), 71 FR 26146 (''Notice'').

[4] *See* Securities Exchange Act Release No. 27753 (March 1, 1990), 55 FR 8626 (March 8, 1990) (order approving File No. SR–Amex–89–29).

[5] Wachovia Corporation (''Wachovia'') and FTSE/Xinhua Index Limited (''FXI''), a joint venture between FTSE International Limited and Xinhua Financial Network, have entered into a non-exclusive license agreement providing for the use of the Xinhua Index by Wachovia and certain affiliates and subsidiaries in connection with certain securities including these Notes. FTSE/Xinhua Index Limited is not responsible and will not participate in the issuance and creation of the Notes.

[6] The LME is the primary futures exchange for copper, lead, nickel, and zinc. The LME is not a cash-cleared market. Both inter-office and floor trading are cleared and guaranteed by a system run by the London Clearing House, whose role is to act as a central counterparty to trades executed between clearing members. The bulk of trading on the LME is transacted through inter-office dealing that allows the LME to operate as a 24-hour market. Liquidity for the four commodities primarily exists during the two daily trading sessions on the floor of the LME, from 11:40 a.m. to 1:15 p.m. and from 3:10 p.m. to 4:35 p.m., London time, and declines substantially outside of these trading sessions. *See* Telephone Conference between Jeffrey Burns, Associate General Counsel, Amex, Raymond Lombardo, Special Counsel, Division of Market Regulation (''Division''), Commission, and Jan Woo, Attorney, Division, Commission, on June 9, 2006. For a more detailed discussion of the LME, *see* Notice, note 3, *supra.*

[7] The initial listing standards for the Notes require: (1) A market value of at least $4 million; and (2) a term of at least one year. Because the Notes will be issued in $1,000 denominations, the minimum public distribution requirement of one million units and the minimum holder requirement of 400 holders do not apply. In addition, the listing guidelines provide that the issuer has assets in excess of $100 million, stockholder's equity of at least $10 million, and pre-tax income of at least $750,000 in the last fiscal year or in two of the three prior fiscal years. In the case of an issuer which is unable to satisfy the earning criteria stated in Section 101 of the Company Guide, the Exchange will require the issuer to have the following: (1) Assets in excess of $200 million and stockholders' equity of at least $10 million; or (2) assets in excess of $100 million and stockholders' equity of at least $20 million.

[8] The Exchange's continued listing guidelines are set forth in Sections 1001 through 1003 of Part 10 to the Exchange's Company Guide. Section 1002(b) of the Company Guide states that the Exchange will consider removing from listing any security where, in the opinion of the Exchange, it appears that the extent of public distribution or aggregate market value has become so reduced to make further dealings on the Exchange inadvisable. With respect to continued listing guidelines for distribution of the Notes, the Exchange will rely, in part, on the guidelines for bonds in Section 1003(b)(iv). Section 1003(b)(iv)(A) provides that the Exchange will normally consider suspending dealings in, or removing from the list, a security if the aggregate market value or the principal amount of bonds publicly held is less than $400,000.

[9] *See* Telephone Conference between Jeffrey Burns, Associate General Counsel, Amex, Raymond Lombardo, Special Counsel, Division, Commission, and Jan Woo, Attorney, Division, Commission, on June 9, 2006.

[10] *Id.*

[11] The Adjustment Factor is initially set at 100% and will be reduced by a rate of 2% per annum compounded daily on an actual 365 day count. On any calendar day, the Adjustment Factor is equal to $(100\% - (2\%/365))^n$. ''n'' is the number of calendar days from but excluding July 21, 2005 to and including the calendar day. The Adjustment Factor as of the Valuation Date will be 93.2341%.

over the term of the Notes.[12] Performance of the Basket will be determined at the close of the market on the Valuation Date prior to maturity of the Notes. The Basket Starting Level will be 1,000 and the Basket Ending Level will be the closing level of the underlying basket on the Valuation Date, equal to the sum of the products of (i) the component multiplier of each basket component and (ii) the closing price or level of the respective basket component on the Valuation Date. The Basket Ending Level is then adjusted by the Adjustment Factor as of the Valuation Date. In the event that the Valuation Date occurs on a non-trading day or if a market disruption event [13] occurs on such date, the Valuation Date will be the next trading day on which no market disruption event occurs.

At maturity, a holder will receive a maturity payment amount per Note equal to $1,000 + Basket Performance Amount. If the Adjusted Basket Ending Level is less than or equal to the Basket Starting Level, the Basket Performance Amount will be zero and the Maturity Payment Amount will be $1,000.

The Basket Performance Amount per Note is equal to the greater of: (i) Zero; and

$$\text{(ii) } \$1{,}000 \times \left(\frac{\text{Adjusted Basket Ending Level} - \text{Basket Starting Level}}{\text{Basket Starting Level}} \right)$$

The Maturity Payment Amount per Note will never be less than the principal investment amount of $1,000.

The Notes are cash-settled in U.S. dollars and do not give the holder any right to receive a portfolio security, dividend payments, or any other ownership right or interest in the portfolio or index of securities comprising the Metals-China Basket. The Notes are designed for investors who desire to participate or gain exposure to the Metals-China Basket, are willing to hold the investment to maturity, and who want to limit risk exposure by receiving principal protection of their investment amount.

Metals-China Basket

The Basket is an equally-weighted basket of the daily settlement value of the futures contracts on four commodities (copper, lead, nickel, and zinc) and the China 25 Index. Each component of the Basket will initially represent 20% of the Basket. The Basket is not a recognized market index and was created solely for purpose of offering the Notes. The Metals-China Basket will not be managed and will remain static over the term of the Notes. The Exchange will calculate an indicative basket amount once each trading day, as opposed to at least every 15 seconds during the trading day. The indicative basket value is the Exchange's estimate of the value of the Notes, less fees. The Exchange believes that this daily dissemination of an indicative basket amount is appropriate because the Notes are a bond traded on Amex's debt floor, the value of which is linked to the basket, and there will be no creation or redemption of shares as there would be with an exchange-traded fund (''ETF'').[14]

China 25 Index

The China 25 Index is designed to represent the performance of the largest companies in the mainland China equity market that are available to international investors. The Index consists of stocks of the 25 largest and most heavily traded Chinese companies.[15] The components of the Index are weighted based on the free-float adjusted total market value of their shares, so that securities with higher total market values generally have a higher representation in the Index. Components are screened for liquidity, and weightings are capped to avoid over-concentration in any one stock. The China 25 Index commenced publication in March 2001. As of September 30, 2005, the top three holdings were China Mobile, PetroChina, and BOC Hong Kong, with the top three industries being telecommunications, oil and gas, and banks.

As of September 30, 2005, the China 25 Index's components had a total market capitalization of approximately $414 billion and a float-adjusted market capitalization of approximately $55 billion.[16] The average total market capitalization was approximately $16.5 billion and the average float-adjusted market capitalization was approximately $22 billion. The ten largest constituents represented approximately 62% of the index weight.

[12] *See* Telephone Conference between Jeffrey Burns, Associate General Counsel, Amex, and Florence Harmon, Senior Special Counsel, Division, Commission, on April 24, 2006. Amex confirmed that the Metals-China Basket is not managed.

[13] A ''market disruption event'' is defined as the failure of the primary market or related markets to open for trading during regular trading hours or the occurrence or existence of any of the following events: (i) A trading disruption, if material, at any time during the one hour period that ends at the close of trading for a relevant exchange or related exchange; (ii) an exchange disruption, if material, at any time during the one hour period that ends at the close of trading for a relevant exchange or related exchange; or (iii) an early closure. A ''trading disruption'' generally means any suspension of, or limitation, imposed on trading by the relevant exchange or related exchange or otherwise, whether by reason of movements in price exceeding limits permitted by the relevant exchange or related exchange or otherwise: (i) Relating to securities that comprise 20% or more of the level of the Index; or (ii) in options contracts on futures contracts or futures contracts relating to the Index on any relevant related exchange. An ''exchange disruption'' means any event (other than a scheduled early closure) that disrupts or impairs the ability of market participants in general to: (i) Effect transactions in, or obtain market values on, any relevant exchange or related exchange in securities that comprise 20% or more of the level of the Index; or (ii) effect transactions in options contracts or futures contracts relating to the Index on any relevant related exchange. A ''related exchange'' is an exchange or quotation system on which futures or options contracts relating to the Index are traded. *See* note 19, *infra*. In cases of a ''market disruption event,'' other than of a temporary nature, the Exchange will file a proposed rule change pursuant to Rule 19b–4 under the Act. Unless approved for continued trading, the Exchange would commence delisting proceedings. *See* Telephone Conference between Jeffrey Burns, Associate General Counsel, Amex, Raymond Lombardo, Special Counsel, Division, Commission, and Jan Woo, Attorney, Division, Commission, on June 9, 2006.

[14] *See* Telephone Conference between Jeffrey Burns, Associate General Counsel, Amex, and Raymond Lombardo, Special Counsel, Division, Commission, on April 13, 2006.

[15] All classes of equity securities in issue are eligible for inclusion in the Index, subject to conforming with free-float and liquidity restrictions. H shares and Red Chip shares are eligible for inclusion in the Index. H shares are incorporated in China and listed and traded on the Hong Kong Stock Exchange. They are quoted and traded in Hong Kong and U.S. dollars. Like other securities trading on the Hong Kong Stock Exchange, there are no restrictions on who can trade H shares. Red Chip shares are incorporated in Hong Kong and trade on the Hong Kong Stock Exchange. They are quoted in Hong Kong dollars. Red Chip companies may be substantially owned directly or indirectly by the Chinese Government and have the majority of their business invested in mainland China. H shares and Red Chip shares trade on the Hong Kong Stock Exchange, typically on a T+2 basis, through a central book-entry system that the Exchange states effectively guarantees settlement of exchange trades by broker-dealers.

[16] Float-adjusted market capitalization includes shares available in the market for public investment and reflects free float adjustments to the Index in accordance with FTSE's free float rules. Additional information regarding FTSE's free float adjustment methodology is available on *http://www.ftse.com*.

The 5 highest weighted stocks, which represented 41.7% of the index weight, had an average daily trading volume in excess of $79 million globally during the past six (6) months.

Component Selection Criteria. The China 25 Index is rule-based and is monitored by a governing committee.[17] The China 25 Index Committee (the ''Index Committee'') is responsible for conducting quarterly reviews of components and for making changes in accordance with applicable procedures. The Index Committee is currently composed of 19 members, four of whom are currently affiliated with non-U.S. broker-dealers. FTSE, FXI, and the Index Committee have adopted policies that prohibit the dissemination and use of confidential and proprietary information about the Index and have instituted procedures designed to prevent the improper dissemination or the use of such information.

Float-Adjusted Market Capitalization. When calculating a component's index weight, shares held by governments, corporations, strategic partners, or other control groups are excluded from the company's shares outstanding. Shares owned by other companies are also excluded, regardless of whether such companies are Index components. Where a foreign investment limit exists at the sector or company level, the component's weight will reflect either the foreign investment limit or the percentage float, whichever is more restrictive. The Exchange states that the component stocks are screened to ensure there is sufficient liquidity to be traded. Factors in determining liquidity include the availability of current and reliable price information and the level of trading volume relative to shares outstanding. Value traded and float turnover are also analyzed on a monthly basis to ensure ample liquidity. Fundamental analysis is not part of the selection criteria for inclusion or exclusion of stocks from the Index. The financial and operating conditions of a company are not analyzed.

Index Maintenance. The Index Committee is responsible for undertaking the review of the China 25 Index and for approving changes of components in accordance with the index rules and procedures. The FTSE Global Classification Committee is responsible for the industry classification of constituents of the Index within the FTSE Global Classification System. The FTSE Global Classification Committee may approve changes to the FTSE Global Classification System and Management Rules. Adjustments to reflect a major change in the amount or structure of a constituent company's issued capital (before the quarterly review) will be made before the start of the index calculation on the day on which the change takes effect. Adjustments to reflect less significant changes (before the quarterly review) will be implemented before the start of the index calculation on the day following the announcement of the change. All adjustments are made before the start of the index calculations on the day concerned, unless prevented by market conditions. A company will be inserted into the Index at the quarterly periodic review if it rises to 15th position or above when the eligible companies are ranked by full market value before the application of any investibility weightings. A company in the Index will be deleted at the quarterly periodic review if it falls to 36th position or below when the eligible companies are ranked by full market value before the application of any investibility weightings. Any deletion to the Index will simultaneously entail an addition to the Index to maintain 25 index constituents at all times.

The quarterly review of the Index constituents takes place in January, April, July, and October. Any changes will be implemented on the next trading day following the third Friday of the same month of the review meeting. Details of the outcome of the review and the dates on which any changes are to be implemented will be published as soon as possible after the Index Committee meeting has concluded its review.

The China 25 Index is reviewed quarterly for changes in free float. These reviews will coincide with the quarterly reviews undertaken of the Index as a whole. Implementation of any changes will be after the close of the index calculation on the third Friday in January, April, July, and October.

Index Dissemination. The Index is calculated in real time and published every minute during the index period (09:15–16:00 Local Hong Kong Time) or (17:15–24:00 U.S. PDT). It is available, by subscription, published every minute, directly from FTSE and from the following vendors: Reuters, Bloomberg, Telekurs, FTID, and LSE/Proquote. The end of day index value, based on last sale prices, is distributed at 16:15 (Local Hong Kong Time). This end of day index value is also made available to the Financial Times Asia edition and other major newspapers and will be available at the FTSE Index Services Web site: *http://www.ftse.com.* The Index is calculated using Hong Kong Stock Exchange trade prices and Reuter's real-time spot currency rates, as described below. A total return index value that takes into account reinvested dividends is published daily at the end of day. The Index is not calculated on days that are holidays in Hong Kong. The daily closing index value, historical values, constituents' weighting, constituents' market capitalization and daily percentage changes are publicly available from *http://www.ftsexinhua.com.* All corporate actions and rules relating to the management of the indices are also available from the Web site.

Exchange Rates and Pricing. FXI calculates the value of the Index using Reuters real-time foreign exchange spot rates and local stock exchange real-time, last sale security prices. The underlying Index is calculated in Hong Kong Dollars, using Hong Kong Stock Exchange trade prices. Non-Hong Kong Dollar denominated constituent prices are converted to Hong Kong Dollars in order to calculate the value of the underlying Index. Thus, the Reuter's foreign exchange rates and Hong Kong Stock Exchange prices received at the closing time of the underlying Index will be used to calculate the final underlying Index value each day.

The Commission has previously approved the listing of securities linked to the performance of the China 25 Index.[18]

Commodities: Copper, Lead, Nickel, and Zinc [19]

The China Metals Basket is an equally-weighted basket of four commodities (copper, lead, nickel and zinc) and the FTSE/Xinhua China 25 Index. Each component of the Basket will initially represent 20% of the Basket. The initial Basket starting level is 1,000 so that each component of the Basket will represent 200 (20% of the

[17] A rule-based methodology has specific standards and is applied without discretion. Additional information regarding the methodology for the China 25 Index is available at *http://www.ftse.com/xinhua/english/Indices/International_Investors/Index_Rules.jsp. See* Telephone Conference between Jeffrey Burns, Associate General Counsel, Amex, Raymond Lombardo, Special Counsel, Division, Commission, and Jan Woo, Attorney, Division, Commission, on June 9, 2006.

[18] *See, e.g.*, Securities Exchange Act Release Nos. 50505 (October 8, 2004), 69 FR 61280 (October 15, 2004) (approving the listing and trading of the iShares FTSE/Xinhua China 25 Index Fund) and 50800 (December 6, 2004), 69 FR 72228 (December 13, 2004) (approving the trading of the iShares FTSE/Xinhua China 25 Index Fund).

[19] *See* Telephone Conference between Jeffrey Burns, Associate General Counsel, Amex, and Raymond Lombardo, Special Counsel, Division, Commission, on June 9, 2006. For a more detailed description of copper, lead, nickel, and zinc, *see* Notice, note 3, *supra.*

Basket). Because the China Metals Basket will not be managed over the term of the Notes, the component weights of the Basket will change due to market fluctuations.

The China-Metals Basket will be calculated and disseminated once each trading day. The Basket will be calculated by the Exchange at the close of the trading day on the basis of the reported closing price for the most active futures contract of the four commodities and the closing level of the FTSE/Xinhua China 25 Index. The value of the Basket will equal the sum of the products of (i) the component weight or multiplier of each Basket component and (ii) the closing level of the Index or the official closing settlement price of the component commodity.

The closing prices and daily settlement prices for the futures contracts are publicly available on the Web sites of the LME at *http://www.lme.com*. In addition, various data vendors and news publications publish futures prices and data. The Exchange has represented that futures quotes and last sale information for the futures contracts on the commodities underlying the Index are widely disseminated through a variety of market data vendors worldwide, including Bloomberg and Reuters.

Trading

Because the Notes are issued in $1,000 denominations, the Amex's existing debt floor trading rules will apply to the trading of the Notes.[20] First, pursuant to Amex Rule 411, the Exchange will impose a duty of due diligence on its members and member firms to learn the essential facts relating to every customer prior to trading the Notes.[21] Second, even though the trading of the notes will occur on the debt trading floor subject to the debt trading rules of the Exchange, the Notes will be subject to the equity margin rules of the Exchange.[22] Third, the Exchange will, prior to trading the Notes, distribute a circular to the membership providing guidance with regard to member firm compliance responsibilities (including suitability recommendations) when handling transactions in the Notes and highlighting the special risks and characteristics of the Notes. With respect to suitability recommendations and risks, the Exchange will require members, member organizations and employees thereof recommending a transaction in the Notes: (1) To determine that such transaction is suitable for the customer, and (2) to have a reasonable basis for believing that the customer can evaluate the special characteristics of, and is able to bear the financial risks of such transaction. In addition, Wachovia will deliver a prospectus in connection with the initial sales of the Notes.

The Exchange represents that its surveillance procedures are adequate to properly monitor the trading of the Notes. Specifically, the Amex will rely on its existing surveillance procedures governing equities, which have been deemed adequate under the Act. In addition, the Exchange also has a general policy which prohibits the distribution of material, non-public information by its employees.

Exchange surveillance procedures applicable to trading in the proposed Notes will be similar to those applicable to other index-linked notes listed and traded on the Exchange. The Exchange also has in place a comprehensive surveillance agreement with the Hong Kong Stock Exchange.[23] In addition, the Hong Kong Exchanges and Clearing Ltd. (''HKEx''), which is the clearing house for both the Hong Kong Stock Exchange and the Hong Kong Futures Exchange, is currently an affiliate member of the Intermarket Surveillance Group (''ISG''). In addition, the Exchange has negotiated an Information Sharing Agreement with the LME regarding the sharing of information related to any financial instrument based, in whole or in part, upon an interest in or performance of copper, lead, nickel, and zinc.

The listing and trading of the China-Metals Notes will be subject to Amex Rules 1203A and 1204A applicable to Commodity-Based Trust Shares. Amex Rule 1203A addresses potential conflicts of interest and provides that the prohibitions in the Amex Rule 175(c) apply to a specialist in the Notes so that the specialist or affiliated person may not act or function as a market maker in the underlying commodities, related futures contracts or option on commodity future, or any other related commodity derivative. An affiliated person of the specialist, consistent with the Amex Rule 193, may be afforded an exemption to act in a market making capacity, other than as a specialist in the Notes on another market center, in the underlying commodities, related futures or options or any other related commodity derivative. More specifically, Amex Rule 1203A provides that an approved person of the specialist that has established and obtained Exchange approval for procedures restricting the flow of material, non-public market information between itself and the specialist member organization, and any member, officer, or employee associated therewith, may act in a market making capacity, other than as a specialist in the Notes, on another market center in the underlying commodity, related commodity futures or options on commodity futures, or any other related commodity derivatives.

Amex Rule 1204A requires that specialists provide the Exchange with all the necessary information relating to their trading in physical commodities and related futures contracts and options thereon or any other related commodities derivative. Amex Rule 1204A states that, in connection with trading the physical asset or commodities, futures or options on futures, or any other related derivatives, the use of material, non-public information received from any person associated with a member, member organization, or employee of such person regarding trading by such person or employee in the physical asset or commodities, futures or options on futures, or any other related derivatives is prohibited by the Exchange.

III. Discussion and Commission's Findings

After careful consideration, the Commission finds that the proposed rule change, as amended, is consistent with the requirements of the Act and the rules and regulations thereunder applicable to a national securities exchange.[24] In particular, the Commission finds that the proposed rule change, as amended, is consistent with the requirements of section 6(b)(5) of the Act,[25] which requires, among other things, that the Exchange's rules be designed to promote just and equitable principles of trade, to remove

[20] Because the Notes are principal protected, the Exchange has not set out specific criteria for trading halts. However, if a ''market disruption event'' occurs that is of more than a temporary nature, the Exchange will cease trading the Notes. In the event a ''market disruption event'' occurs that is of more than a temporary nature, the Exchange would immediately contact the Commission to discuss measures that may be appropriate under the circumstances. *See* Telephone Conference between Jeffrey Burns, Associate General Counsel, Amex, and Florence Harmon, Senior Special Counsel, Division, Commission, on April 24, 2006.

[21] Amex Rule 411 requires that every member, member firm or member corporation use due diligence to learn the essential facts, relative to every customer and to every order or account accepted.

[22] *See* Amex Rule 462 and Section 107B of the Company Guide.

[23] *See* Telephone Conference between Jeffrey Burns, Associate General Counsel, Amex, and Florence Harmon, Senior Special Counsel, Division, Commission, on April 24, 2006.

[24] In approving this proposed rule change, the Commission notes that it has considered the proposed rule's impact on efficiency, competition, and capital formation. *See* 15 U.S.C. 78c(f).

[25] 15 U.S.C. 78f(b)(5).

impediments to and perfect the mechanism of a free and open market and a national market system and, in general, to protect investors and the public interest.

A. Surveillance

Information sharing agreements with primary markets are an important part of a self-regulatory organization's ability to monitor for trading abuses in derivative products. The Commission believes that the Exchange's comprehensive surveillance sharing agreements with the LME and the Hong Kong Stock Exchange for the purpose of providing information in connection with trading of the Index components and commodity futures contracts on which the Notes are based create the basis for Amex to monitor for fraudulent and manipulative practices in the trading of the Notes. The Exchange represents that all of the other trading venues on which current Index components are traded are members of the ISG and the Exchange has access to all relevant trading information with respect to those contracts without any further action.

Moreover, Amex Rule 1204A requires Exchange specialists to provide the Exchange with information relating to their trading in physical commodities and related futures contracts and options thereon or any other related commodities derivative. The Commission believes that these rules provide Amex with the tools necessary to adequately surveil trading in the Notes.

B. Dissemination of Information

The Commission believes that sufficient venues exist for obtaining reliable information so that investors in the Notes can monitor the underlying Index relative to the indicative value of their Notes. There is a considerable amount of information about the Index and its components available through public Web sites and professional subscription services, including Reuters and Bloomberg. The Index is calculated in real time by FXI and published every minute during the index period (09:15–16:00 Local Hong Kong Time) or (17:15–24:00 U.S. PDT) and is available, by subscription, directly from FTSE and from the following vendors: Reuters, Bloomberg, Telekurs, FTID, and LSE/Proquote.

The closing prices and daily settlement prices for the futures contracts on copper, lead, nickel and zinc are publicly available on the Web sites of the LME at *http://www.lme.com*. In addition, various data vendors and news publications publish futures prices and data. The Exchange has represented that futures quotes and last sale information for the commodities underlying the Index are widely disseminated through a variety of market data vendors worldwide, including Bloomberg and Reuters.

The Exchange will calculate and disseminate an indicative basket value once each trading day. The Commission believes that this daily dissemination of an indicative basket amount is appropriate because the Notes are a bond traded on Amex's debt floor, the value of which is linked to the basket but at maturity is at least 100% of the principal investment amount, and there will be no creation or redemption of shares as there would be with an ETF. The end of day index value, based on last sale prices, is distributed at 16:15 (Local Hong Kong Time) and is available through the Financial Times Asia edition and other major newspapers and on the FTSE Index Services Web site: *http://www.ftse.com*. In addition, the daily closing index value, historical values, constituents' weighting, constituents' market capitalization and daily percentage changes, as well as, all corporate actions and rules relating to the management of the indices, are publicly available from *http://www.ftsexinhua.com*. The commodity prices are determined by the cash settlement price of each respective commodity futures contract traded on the LME. Wachovia will determine the value of the Notes at maturity, which will consist of at least 100% of the principal investment amount, plus the Basket Performance Amount.

C. Listing and Trading

The Commission finds that the Exchange's proposed rules and procedures for the listing and trading of the proposed Notes are consistent with the Act. The Notes will trade as debt securities subject to Amex rules including, among others, rules governing equity margins, specialist responsibilities, account opening and customer suitability requirements. The Commission believes that the listing and delisting criteria for the Notes should help to maintain a minimum level of liquidity and therefore minimize the potential for manipulation of the Notes. Finally, the Commission notes that the circular that the Exchange will distribute will inform members and member organizations about the terms, characteristics and risks in trading the Notes, including their prospectus delivery obligations.

IV. Conclusion

It is therefore ordered, pursuant to section 19(b)(2) of the Act, that the proposed rule change (SR–Amex–2005–105), as amended, be, and it hereby is, approved.

For the Commission, by the Division of Market Regulation, pursuant to delegated authority.[26]

Nancy M. Morris,

Secretary.

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SECURITIES AND EXCHANGE COMMISSION

[Release No. 34–54035; File No. SR–BSE–2006–20]

Self-Regulatory Organizations; Boston Stock Exchange, Inc.; Notice of Filing of Proposed Rule Change and Amendment Nos. 1 and 3 Thereto To Create a New Electronic Trading Facility, the Boston Equities Exchange (''BeX''), To Be Operated by BSX Group, LLC

June 22, 2006.

Pursuant to section 19(b)(1) of the Securities Exchange Act of 1934 (''Act''),[1] and Rule 19b–4 thereunder, [2] notice is hereby given that on May 5, 2006, the Boston Stock Exchange, Inc. (''BSE'' or ''Exchange'') filed with the Securities and Exchange Commission (''SEC'' or ''Commission'') the proposed rule change as described in Items I, II and III below, which Items have been prepared by the BSE. BSE filed Amendment No. 1 to the proposed rule change on June 1, 2006.[3] BSE filed Amendment No. 3 to the proposed rule change on June 15, 2006.[4] The Commission is publishing this notice to solicit comments on the proposed rule change, as amended, from interested persons.

I. Self-Regulatory Organization's Statement of the Terms of Substance of the Proposed Rule Change

The Exchange is proposing to create a new electronic trading facility, the Boston Equities Exchange (''BeX''), to be operated by BSX Group, LLC (''BSX''). This rule filing sets forth the proposed governance structure of BSX and

[26] 17 CFR 200.30–3(a)(12).

[1] 15 U.S.C. 78s(b)(1).

[2] 17 CFR 240.19b–4.

[3] Amendment No. 1 superseded and replaced the original filing in its entirety. Amendment No. 2 was withdrawn by BSE on June 9, 2006.

[4] Amendment No. 3 supersedes and replaces the original filing and Amendment No. 1 in their entirety.

proposed changes regarding BSE membership relating to the creation of BeX. Changes to the BSE's equity trading rules are set forth in a separate filing.[5]

The text of the proposed rule change is available on the Exchange's Web site (*http://www.bostonstock.com*), at the Exchange's Office of the Secretary, and at the Commission's Public Reference Room. The text of the proposed rule change is also available on the Commission's Web site (*http://www.sec.gov/rules/sro.shtml*).

II. Self-Regulatory Organization's Statement of the Purpose of, and Statutory Basis for, the Propose Rule Change

In its filing with the Commission, the Exchange included statements concerning the purpose of, and basis for, the proposed rule change, as amended, and discussed any comments it received on the proposed rule change, as amended. The text of these statements may be examined at the places specified in Item IV below. The Exchange has prepared summaries, set forth in Sections A, B, and C below, of the most significant aspects of such statements.

A. Self-Regulatory Organization's Statement of the Purpose of, and Statutory Basis for, the Proposed Rule Change

1. Purpose

The BSE proposes to create a new electronic trading facility, as that term is defined in section 3(a)(2) of the Act,[6] called BeX. BeX, which is to be developed, owned, and operated by BSX, would be an electronic securities communications and trading facility intended for the use of BSE members, including the new category of ''Electronic Access Members'' (described below) and their customers.

a. Relationship of the BSE to BSX

The BSE is entered into various agreements with BSX, under which BSX, of which the Exchange is currently a majority owner, would operate BeX as a facility of the BSE. All of the assets and liabilities that solely support the equities trading business and equities clearing business of the BSE will be transferred to BSX. Upon restructuring, however, the BSE will continue to be the self-regulatory organization (''SRO'') for BeX, and will continue to regulate the equities market under its current rule framework.[7] The BSE also proposes to create a new category of BSE Members called Electronic Access Members (''EAMs'') that will be entitled to trade equity securities on BeX. All of the proposed changes to facilitate this restructuring would be set forth in the BSX Group LLC Operating Agreement (''Agreement''), and reflected in changes to the Exchange's Constitution and a related provision in the Exchange's Rules of the Board of Governors (''BSE Rules''). The BSE Members approved the proposed changes to the Constitution. Although some additional changes may be required to BSE Rules, such changes are not the subject of this filing.[8]

The relationship between the BSE, BSX, and BeX is explained further in proposed Article XXI of the BSE Constitution and the Agreement. Under Article XXI, the books, records, and premises of BSX would be deemed to be the books, records, and premises of the BSE subject to oversight pursuant to the Act. The books and records of BSX would be subject at all times to inspection and copying by the BSE and the Commission. In addition, proposed Article XXI states that ''[a]ll officers, directors employees and agents of BSX Group, LLC are the officers, directors, employees and agents of the Exchange for the purposes of the Act.'' As set forth in proposed Article XXI and the Agreement, these provisions would not be deemed to create any rights or benefits for any person or entity other than the SEC and the BSE.[9]

The structure of the proposed BSX would be substantially the same as that which the Exchange has established for its options trading business. For its options business, the Exchange established the BOX Market, which is controlled by the BOXG. The BSE is a founding member and owned about a 30% interest in BOXg at its inception.[10] BOXG operates the BOX Market, which is the BSE's marketplace for trading options. BOXR, a wholly owned substantially of the BSE, regulates the BOX Market. Similarly, the proposed BSX would operate BeX, which is the proposed BSE marketplace for trading equities. The BSE would own a controlling interest in BSX of approximately 58.33% at inception, which is approximately twice the percentage that the BSE initially owned of BOXG. The BSE would regulate the BeX market via a contract, rather than through a separate wholly owned substantially to which it delegates its self-regulatory responsibilities.

b. The BeX Market

There are two principal reasons the BSE proposes to create the BeX and to institute a system of EAMs.[11] First, by restructuring the control of its equities business as a limited liability company with business control and management by the directors and officers of BSX, the Exchange believes that the new entity will have greater flexibility to build and execute approaches designed to improve its competitive position, including the development of strategic relationships. Furthermore, the BSE anticipates that by restructuring so that a separately controlled organization is responsible for the operation of its equities business, the management of BSX will be better able to respond quickly to competitive pressures and to make changes to the operation as market conditions warrant.

Second, the BSE intends to increase the revenue of its equities business by conferring trading privileges on EAMs that do not bear the costs of seat ownership.[12]

The proposed BeX structures, although representing a departure from the way the BSE currently operates its equities business, is not significantly different from the way the Exchange currently conducts its options trading marketplace, as discussed above. Moreover, the proposed structure is similar in many ways to the composition of PCX/Arca. However, with both BOX and PCX/Arca, regulatory authority was delegated to SRO subsidiaries. In BeX, the BSE will

[5] On May 10, 2006, the Exchange filed with the Commission a proposed rule change to implement rules governing BeX (SR–BSE–2006–22).

[6] Under the Act, the ''term 'facility' when used with respect to an exchange includes its premises, tangible or intangible property whether on the premises or not, any right to the use of such premises or property or any service thereof for the purpose of effecting or reporting a transaction on an exchange (including, among other things, any system of communication to or from the exchange, by ticker or otherwise, maintained by or with the consent of the exchange), and any right of the exchange to the use of any property or service.'' *See* 15 U.S.C. 78c(a)(2).

[7] The proposed restructuring would not affect the Boston Options Exchange facility (''BOX Market'') which is controlled by the Boston Options Exchange Group, LLC (''BOXG''). The BSE is a founding member and owner of the BOXG, and the BOX Market is regulated by Boston Options Exchange Regulation, LLC (''BOXR''), a wholly-owned subsidiary of the BSE to which the BSE has delegated regulatory oversight authority for the BOX Market.

[8] *See note* 5, *supra.*

[9] The Commission notes that proposed Article XXI does not expressly state that it would ''not be deemed to create any rights or benefits for any person or entity other than the SEC and the BSE.''

[10] The BSE currently owns about 1 17% interest in BOXG.

[11] ''EAMs'' is used in this filing to refer both to Electronic Access Members and Electronic Access Memberships.

[12] The BSE intends to keep fees imposed upon EAMs consistent with the applicable fees imposed upon non-EAMs. A separate rule filing will address all fees related to the BeX, including EAM and non-EAM fees.

continue to directly regulate its equities trading business, without delegation to any subsidiary or facility. The BSE believes that it will be able to optimize its regulatory oversight of its equities business through the proposed approach. The Exchange notes that this model is in congruence with recent governance change at the Exchange, whereby the Exchange separated its Chairman and Chief Executive Officer roles,[13] and in a separate BSE Board of Governors action established a Regulatory Oversight Committee, so as to more effectively protect the integrity of the Exchange's regulatory function.

c. BSX

The BSE states that BSX will be run by its management with limited policy direction by Exchange members. The entity will be controlled by its own Board of Directors, which will be responsible for the commercial governance of BeX, subject at all times to BSE's overriding regulatory responsibility. Currently, there are six ''Members'' of BSX (''BSX Members'') who have a direct controlling interest in BSX (''direct controlling parties'') : The BSE (approximately 58.33%), and Citigroup Financial Strategies Inc. (''Citi''); Credit Suisse First Boston Next Fund Inc. (''CSFB''); LB 1 Group, Inc. (''Lehman''), Fidelity Global Brokerage Group, Inc. (''Fidelity''); and Merrill Lynch L.P. Holdings Inc. (''Merrill'') (each approximately 8.33%) (collectively, the ''Founding Members'').

In this filing, the BSE is submitting the Agreement, and specifically discussing those provisions related to the control and governance of BSX that will ensure that the BSE has the authority within BSX to maintain its responsibility for all regulatory functions related to the BeX. The Exchange's discussion of the Agreement will focus on the provisions of the Agreement related to BSE's authority for all regulatory functions of the proposed BeX facility.

(i) Governance of BSX

Section 4.2(b) of the Agreement gives the Board of Directors of BSX (''Board'') the power and responsibility to manage the business of BSX, select and evaluate the performance of the Senior Executive, and establish and monitor capital and operating budgets. Section 4.1(a) provides that the Board will consist of between five and 15 directors. Section 4.1(b) provides that, initially, the BSE will be entitled to designate two directors, while Citi, CSFB, Lehman, Fidelity and Merrill will each be entitled to designate one director. Moreover, for as long as BeX remains a facility of the Exchange, BSE will have the right to designate at least one director. Section 4.1(d) provides that any new Member that acquires a prescribed percentage interest in BSX also would be entitled to designate one director.[14] Section 4.8 provides that, except as otherwise expressly provided in the Agreement or as requested by the Board, no BSX Member shall take part in the day-to-day management or operation of the business or affairs of BSX.

Pursuant to Section 4.1(c) of the Agreement, a director shall be terminated by the Board: (i) In the event such director has violated any provision of the Agreement or state or federal securities laws; or (ii) if the Board determines that such action is necessary or appropriate in the public interest or for the protection of investors. In addition, Section 4.2(a) requires each director to agree to comply with the federal securities laws and the rules and regulations thereunder and to cooperate with the Commission and BSE pursuant to their regulatory authority and the provisions of the Agreement. Furthermore, the Agreement provides that each director must take into consideration whether his or her actions as a director would cause BSX to engage in conduct that fosters and does not interfere with BSX's ability to prevent fraudulent and manipulative acts and practices, promote just and equitable principles of trade, foster cooperation and coordination with persons engaged in regulating clearing, settling, processing information with respect to, and facilitating transactions in securities, remove impediments to and perfect the mechanism of a free and open market and a national market system, and, in general, protect investors and the public interest.

(ii) Regulation of BeX

BSE states that it will regulate BeX as a facility of the Exchange. BSE has responsibility under the Act for the BeX facility. BSX, as owner and operator of the BeX facility, will also be subject to the Commission's jurisdiction. In this regard, Sections 12.1 and 15 of the Agreement each provide that the books, records, premises, officers, directors, agents, and employees of BSX shall be deemed to be the books, records, premises, officers, directors, agents, and employees of BSE for the purpose of and subject to oversight pursuant to the Act. Moreover, under Section 5.3 of the Agreement, each BSX Member agrees to comply with the federal securities laws and the rules and regulations thereunder and to cooperate with the Commission and BSE pursuant to their regulatory authority and the provisions of the Agreement.

Section 5.8 of the Agreement further provides that, after appropriate notice and opportunity for hearing, the Board, by a two-thirds vote, including the affirmative vote of BSE and excluding the vote of the Member subject to sanction, may suspend or terminate a BSX Member's voting privileges or ownership: (i) In the event such Member is subject to a statutory disqualification, as defined in Section 3(a)(39) of the Act; (ii) in the event such Member has violated any provision of the Agreement or any federal or state securities law; or (iii) if the Board determines that such action is necessary or appropriate in the public interest or for the protection of investors.

In addition, Section 4.4(a) of the Agreement provides that BSX may not take any ''Super Major Action'' unless such action is approved by 75% of the Board, including four of the Founding Members and the affirmative vote of all of the directors designated by BSE. A ''Super Major Action'' is defined in Section 4.4(b) to include, among other things: A merger or consolidation involving BSX; a sale of any material portion of its assets; appointing directors to afford representation to BSX Members, other than Founding Members, having a percentage interest less than 5.00% operating the BeX with a Regulatory Services Provider other than the BSE or an affiliate of the BSE; making a material change to the market structure of BeX; the acquisition of any BSX Units (''Units'') [15] by any person that results in such person holding an aggregate percentage interest in BSX equal to or greater than 20%; altering the provisions for Board membership for the Founding Members; entry by BSX

[13] *See* Securities Exchange Act Release No. 49611 (April 23, 2004), 69 FR 23833 (April 30, 2004) (File No. SR–BSE–2004–10).

[14] The Commission notes that Section 4.1(d) of the Agreement states that ''the Board shall determine the number of Board seats, if any, to be designated by the new or Transfree Member and will determine the disposition of the Board seats designated by any Transferring Member.''

[15] The Agreement defines ''Units'' as ''equal units of limited liability company interest in the Company, including an interest in the ownership and profits and losses of the Company and the right to receive distributions from the Company as set forth in this Agreement. For the avoidance of doubt, the ownership or possession of Units shall not in and of itself entitle the owner or holder thereof to vote or consent to any action with respect to the Company (which rights, except as otherwise specifically provided in this Agreement with respect to BSE, shall be bested in only duly admitted members of the Company), or to exercise any right of a member of the Company under this Agreement, the Act or other applicable law.

into any other line of business other than the development, operation, and ownership of the BeX; except as expressly contemplated by the Agreement and the Related Agreements, as defined in the Agreement; entering into any agreement, commitment, or transaction with a BSX Member or any of its affiliates other than transactions or agreements upon commercially reasonable terms that are no less favorable to BSX than BSX would obtain in a comparable transaction or agreement with a third party; taking any action which would effect the voluntary, or which would precipitate an involuntary, dissolution or winding up of BSX; and entering into any partnership, joint venture or other similar joint business undertaking.

Section 16.2(a) of the Agreement generally provides that a BSX Member may not disclose any confidential information of BSX to any person, except as expressly provided by the Agreement. However, Section 16.2(b) provides exceptions for, among other things, disclosure required by the federal securities laws or in response to a request by the Commission pursuant to the Act, by the BSE or by another applicable SRO. Similarly, Section 16.5 of the Agreement provides that nothing in the Agreement should be interpreted as to limit or impede the rights of the Commission or BSE to access or examine BSX confidential information, or to limit or impede the ability of Members, or their officers, directors, agents, or employees, to disclose BSX confidential information to the Commission, or BSE.

(iii) Changes in Ownership of BSX

Section 8.1(a) of the Agreement defines a ''Transfer'' to be the direct or indirect, whether voluntary or involuntary, by operation of law or otherwise, transfer, disposition of, sale, lending, pledging, hypothecation, encumbrance, assignment, exchange, participation, subparticipation, or other transfer, in any manner, of Units, and provides that, except in certain limited circumstances, no person may directly or indirectly transfer any Units, or any rights arising thereunder, without the prior approval of the Board. To be eligible for such approval, the proposed transferee must: (1) Have sufficient financial assets to support such a Transfer; (2) be able to carry out its duties as a BSX Member under the Agreement (if admitted); and (3) be under no regulatory or governmental disqualification. Section 8.1(b) provides, in addition, that a person shall be admitted to BSX as a Member only upon (i) such person's execution of a counterpart of the Agreement to evidence its written acceptance of the terms and provisions of the Agreement, and acceptance thereof by resolution of the Board, which acceptance may be given or withheld in the sole discretion of the Board, (ii) if such person is a transferee, its agreement in writing to its assumption of the obligations of its assignor under the Agreement and acceptance thereof by resolution of the Board, which acceptance may be given or withheld in the sole discretion of the Board, (iii) if such person is a transferee, confirmation by the Board that the Transfer was permitted by the Agreement, and (iv) approval of the Board. Whether or not a transferee who acquired any Units has accepted in writing the terms and provisions of the Agreement and assumed in writing the obligations of its predecessor in interest, the transferee shall be deemed, by the acquisition of those Units, to have agreed to be subject to and bound by all the obligations of the Agreement with the same effect and to the same extent as any predecessor in interest of such transferee.

Section 8.4(a) provides that no Transfer of Units may take place if such transaction: (i) In the opinion of tax counsel to the BSX, could cause a termination of the BSX within the meaning of Section 708 of the United States Internal Revenue Service Code or, (ii) in the opinion of the Board, based on advice of tax counsel, could cause a termination of the Company's status as a partnership or cause the Company to be treated as a publicly traded partnership for federal income tax purposes, (iii) is prohibited by any state, Federal or provincial securities laws, or (iv) is prohibited by the Agreement. Section 8.4(c) provides that any Transfer of Units, whether direct or indirect, voluntary or involuntary, by operation of law or otherwise, in contravention of any of the provisions of Article 8 of the Agreement would be void *ab initio*, and ineffectual, and would not bind or be recognized by BSX.

Section 8.4(d) of the Agreement provides that, beginning after Commission approval of this proposed rule change, BSX would be required to provide the Commission with written notice ten days prior to the closing date of any acquisition that results in a BSX Member's percentage ownership interest in BSX, alone or together with any affiliate, meeting or crossing either the 5%, 10%, or 15% thresholds.

Section 8.4(e) provides that any Transfer of Units that results in the acquisition and holding by any person, alone or together with any affiliate, of an interest that meets or crosses the 20% threshold or any successive 5% threshold (*i.e.,* 25%, 30%, etc.), would trigger an amendment to the Agreement that would constitute a proposed rule change that BSE would be required to file with the Commission under section 19(b) of the Act. In addition, section 8.4(e) provides that an amendment to the Agreement resulting from a Transfer of Units that reduces BSE's ownership in BSX to below the 20% threshold would require a proposed rule change under section 19(b) of the Act. Additionally, SEC approval would be required to permit any person, alone or together with any affiliate, to control greater than 20% of the Total Votes (as defined in section 4.4(a)) of BSX.

Section 8.4(f) of the Agreement provides for indirect changes in control of BSX. Any person that acquires a controlling interest (*i.e.,* an interest of 25% or greater) in a BSX Member that holds 20% or more of the Units would be required to agree to become a party to the Agreement and abide by its terms. The amendment to the Agreement caused by the addition of the indirect controlling party would trigger a proposed rule change that BSE would be required to file with the Commission pursuant to section 19(b) of the Act. The rights and privileges of the direct controlling party would be suspended until that proposed rule change became effective under the Act or until the indirect controlling party ceased to have a controlling interest in the direct controlling party.

Section 8.5 addresses BSX ownership concentration limits. Section 8.5(a) limits any person who, either alone or with its affiliates, is a BeX Market Participant [16], form owning in the aggregate more than 20% of the outstanding units of BSX (the ''Ownership Concentration Limit''). Section 8.4(b) sets forth any Person that is not a BeX Market Participant that, alone or together with affiliates exceeds the Ownership Concentration Limit, and subsequently becomes a BeX Market Participant, must, within 180 days, transfer sufficient interest so that the Person who is also a BeX Market Participant does not exceed the Ownership Concentration Limit.[17]

In addition to the requirements for proposed rule changes relating to direct

[16] The Agreement defines ''BeX Market Participant'' as ''a firm, or organization that is registered with the BSE pursuant to the BSE Rules for purposes of participating in equities trading on the BeX.''

[17] The Commission notes that while Section 8.5(b) of the Agreement provides for a cure period of 180 days, Chapter XVIII of the BSE Rules, Section 6 provides for a cure period of only 15 calendar days.

and indirect changes in control of BSX, section 4.3(c) of the Agreement prohibits BSX Members from entering into voting trust agreements with respect to their ownership interests in BSX.

(iv) Commission Jurisdiction Over Owners of BSX

Pursuant to section 18.6(a), each Member of BSX, by becoming party to the Agreement, would acknowledge that, to the extent that they are related to BSX activities, the books, records, premises, officers, directors, agents, and employees of the BSX Member will be deemed to be the books, records, premises, officers, directors, agents, and employees of BSE for the purpose of and subject to oversight pursuant to the Act. Pursuant to section 18.6(b), BSX and its Members, by becoming party to the Agreement, would agree that BSX's officers, directors, agents, and employees, as well as the officers, directors, agents and employees of BSX Members must irrevocably submit to the jurisdiction of the U.S. Federal courts, the Commission, and BSE for the purposes of any suit, action, or proceeding pursuant to the U.S. Federal securities laws and the rules or regulations thereunder, arising out of or relating to BSX activities or section 18.6(a). Also as provided in section 18.6(b) of the Agreement, each Member, officer, director, agent and employee of BSX, as well as the officers, directors, agents, and employees of BSX Members would waive, and agree not to assert by way of motion, as a defense or otherwise in any such suit, action, or proceeding, any claim that they are not personally subject to the jurisdiction of the Commission; that the suit, action or proceeding is an inconvenient forum; that the venue of the suit, action, or proceeding is improper; or that the subject matter of the suit, action, or proceeding may not be enforced in or by such courts or agency. Section 18.6(c) of the Agreement would require the BSE and each other BSX Member to take such action as is necessary to ensure that such Member's officers, directors, and employees consent to the application of section 18.6 with respect to their BSX-related activities.

d. Electronic Access Members

As a second part of the proposed reorganization, the BSE is seeking to permit a new type of member and membership, EAMs, which will allow persons or firms to conduct business on the Exchange without having to purchase seats. The Exchange would issue EAMs to persons or entities that wish to engage in equity transactions on the Exchange. Those seeking to become EAMs would need to satisfy all of the requirements for membership on the Exchange, as set forth in the Exchange Constitution and Rules, with the exception of purchasing a seat.

These Electronic Access memberships would provide access to the BeX, but would not confer the same rights and privileges as are conferred by Exchange seats. Specifically, EAMs would be represented on the BSE Board of Governors and on its various constitutional committees in the same capacity and to the same extent as BSE Members and will also have the right to vote in the same capacity as BSE Members, except with respect to Exchange ownership matters—specifically those matters related to mergers, consolidations, dissolution, liquidation, transfer, or conversion of assets of the Exchange. For the purposes of the Act, EAMs would be considered statutory Members of the BSE. There would be no limit to the number of EAMs issued, provided that, in the determination of the BSE Board of Governors, sufficient operational capacity existed to grant additional EAMs.

BSE seat holders would also have access to the BeX, and so would not need to separately be approved as EAMs. Seat holders would also retain ownership interests in the BSE and, by extension, in all BSE facilities.

2. Statutory Basis

The Exchange believes that the proposed rule change is consistent with section 6(b) of theAct,[18] in general, and furthers the objectives of section 6(b)(1),[19] in particular, in that it is designed to enforce compliance by the Exchange's members with the rules and regulations of the Act and the rules of the Exchange; and section 6(b)(5),[20] in particular, in that it is designed to facilitate transactions in securities; to prevent fraudulent and manipulative acts and practices; to promote just and equitable principles of trade; to foster cooperation and coordination with persons engaged in regulating, clearing, settling, processing information with respect to, and facilitating transactions in securities; to remove impediments to and perfect the mechanism of a free and open market and a national market system; and in general, to protect investors and the public interest.

[18] 15 U.S.C. 78f(b).

[19] 15 U.S.C. 78f(b)(1).

[20] 15 U.S.C. 78f(b)(5).

B. Self-Regulatory Organization's Statement on Burden on Competition

The Exchange does not believe that the proposed rule change, as amended, will impose any burden on competition not necessary or appropriate in furtherance of the purposes of the Act.

C. Self-Regulatory Organization's Statement on Comments on the Proposed Rule Change Received From Members, Participants or Others

The Exchange has neither solicited nor received comments on the proposed rule change, as amended.

III. Date of Effectiveness of the Proposed Rule Change and Timing for Commission Action

Within 35 days of the date of publication of this notice in the **Federal Register** or within such longer period (i) as the Commission may designate up to 90 days of such date if it finds such longer period to be appropriate and publishes its reasons for so finding or (ii) as to which the self-regulatory organization consents, the Commission will:

A. By order approve such proposed rule change, as amended; or

B. Institute proceedings to determine whether the proposed rule change, as amended, should be disapproved.

IV. Solicitation of Comments

Interested persons are invited to submit written data, views, and arguments concerning the foregoing, including whether the proposed rule change, as amended, is consistent with the Act. Comments may be submitted by any of the following methods:

Electronic Comments

- Use the Commission's Internet comment form (*http://www.sec.gov/rules/sro.shtml*); or
- Send an e-mail to *rule-comments@sec.gov.* Please include File Number SR–BSE–2006–20 on the subject line.

Paper Comments

- Send paper comments in triplicate to Nancy M. Morris, Secretary, Securities and Exchange Commission, Station Place, 100 F Street, NE., Washington, DC 20549–1090.

All submissions should refer to File Number SR–BSE–2006–20. This file number should be included on the subject line if e-mail is used. To help the Commission process and review your comments more efficiently, please use only one method. The Commission will post all comments on the Commission's Internet Web site (*http://www.sec.gov/rules/sro.shtml*). Copies of the

submission, all subsequent amendments, all written statements with respect to the proposed rule change that are filed with the Commission, and all written communications relating to the proposed rule change between the Commission and any person, other than those that may be withheld from the public in accordance with the provisions of 5 U.S.C. 552, will be available for inspection and copying in the Commission's Public Reference Room. Copies of such filing also will be available for inspection and copying at the principal office of the Exchange. All comments received will be posted without change, the Commission does not edit personal identifying information from submission. You should submit only information that you wish to make available publicly. All submissions should refer to File Number SR–BSE–20067–20 and should be submitted on or before July 20, 2006.

For the Commission, by the Division of Market Regulation, pursuant to delegated authority.[21]

Nancy M. Morris,

Secretary

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SECURITIES AND EXCHANGE COMMISSION

[Release No. 34–54034; File No. SR–BSE–2006–22]

Self-Regulatory Organizations; Boston Stock Exchange, Inc.; Notice of Filing of Proposed Rule Change and Amendment Nos. 1, 2, and 3 Thereto To Implement the Boston Equities Exchange (''BeX'') Trading System

June 22, 2006.

Pursuant to section 19(b)(1) of the Securities Exchange Act of 1934 (''Act''),[1] and Rule 19b–4 thereunder,[2] notice is hereby given that on May 10, 2006, the Boston Stock Exchange, Inc. (''BSE'' or ''Exchange'') filed with the Securities and Exchange Commission (''SEC'' or ''Commission'') the proposed rule change as described in Items I, II and III below, which Items have been prepared by the BSE. BSE filed Amendment No. 1 to the proposed rule change on June 2, 2006.[3] BSE filed Amendment No. 2 to the proposed rule change on June 9, 2006.[4] BSE filed Amendment No. 3 to the proposed rule change on June 15, 2006.[5] The Commission is publishing this notice to solicit comments on the proposed rule change, as amended, from interested persons.

I. Self-Regulatory Organization's Statement of the Terms of Substance of the Proposed Rule Change

The Exchange is proposing the implementation of the Boston Equities Exchange (''BeX'') trading system, a fully-automated electronic book for the display and execution of orders in securities listed otherwise than on The Nasdaq Stock Market (''Nasdaq'') for which the BSE obtains unlisted trading privileges (''UTP'') after June 30, 2006.[6]

The text of the proposed rule change is available on the Exchange's Web site (*http://www.bostonstock.com*), at the Exchange's Office of the Secretary, and at the Commission's Public Reference Room.

The text of the proposed rule change also appears below.[7] Proposed new language is *italicized.*

RULES OF THE BOSTON STOCK EXCHANGE

Chapter II—Dealings on the Exchange

Sections 1 through 40. No Change.

SEC. 41. Minimum Price Variation

The Minimum Price Variation shall be 0.01. Those securities trading in fractions shall continue to trade in Minimum Price Variations as currently approved by the Exchange. *Mid-Point Cross Orders may be executed and reported in increments as small as one-half of the Minimum Price Variation.*

Sections 42 through 43. No Change.

Chapter XXXVII—Boston Equities Exchange (''BeX'') Trading System

The Boston Equities Exchange (''BeX'') trading system is a fully-automated facility of the Exchange, which allows eligible orders in eligible securities to electronically match and execute against one another.

Section 1. BeX Eligible Securities

(a) Eligible Securities. All securities eligible for trading on the Exchange that are listed otherwise than on The Nasdaq Stock Market for which the BSE obtains unlisted trading privileges (''UTP'') after June 30, 2006 shall be eligible for trading through BeX. Any specialist request to remove a security from BeX shall be considered by the appropriate Board Committee.

Section 2. Eligible Orders

(a) All orders sent to BeX must be round lot market or limit orders, specifically designated in the manner specified by the Exchange for trading in BeX.

(b) All orders sent to BeX must be for regular way settlement.

(c) Eligible order types:

(i) Orders eligible for execution in BeX may be designated as one of the following existing BSE order types as defined in Chapter I, Section 3 except that any reference in the existing BSE Rules to the execution of Orders as soon as ''represented at the specialist's post'' shall for purposes of this Section be understood to mean ''entered in BeX'':

(A) At the Opening or At the Opening Only Order.

(B) Day Order.

(C) Do Not Increase (DNI).

(D) Do Not Reduce (DNR).

(E) Fill or Kill.

(F) Good 'Till Cancel Order.

(G) Immediate or Cancel.

(H) Limit, Limited Order or Limited Price Order.

(I) At the Close.

(J) Market Order.

(K) Stop Limit Order.

(L) Stop Order.

With the exception of Fill or Kill and Immediate or Cancel Orders, a customer may append to an Order an instruction that the Order be cancelled or routed to the market(s) displaying the National Best Bid or Offer if the Order would trade through the National Best Bid or Offer if executed on the BeX.

(ii) Orders eligible for execution in BeX may also be designated as one of the following additional order types:

(A) ''Cross'': An order to buy and sell the same security at a specific price better than the best bid and offer displayed in BeX and equal to or better than the National Best Bid and Offer. A Cross Order may represent interest of one or more BSE Members.

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[21] 17 CFR 200.30–3(a)(12).

[1] 15 U.S.C. 78s(b)(1).

[2] 17 CFR 240.19b–4.

[3] Amendment No. 1 replaces and supersedes the original filing in its entirety.

[4] Amendment No. 2 replaces and supersedes the original filing and Amendment No. 1 in their entirety.

[5] Amendment No. 3 replaces and supersedes the original filing, Amendment No. 1 and Amendment No. 2 in their entirety.

[6] The rules governing trading in Nasdaq stocks (BSE Rules, Chapter XXXV) and the rules governing trading in listed securities assigned to a specialist (BSE Rules, Chapters I, II, III, XV, XVI, XVII, XIX, and XXXIII) remain unchanged. Separate from this rule filing, the BSE intends to apply for UTP in all stocks listed otherwise than on The Nasdaq Stock Market for which we do not yet have UTP.

[7] The Commission notes that the rule text submitted by the Exchange contained several technical errors, which, for the purpose of this notice, have been corrected. In addition, the reference to ''Market'' orders contained in the last sentence of proposed Chapter XXXVII, Section 3(f)(ii) should instead be ''At the Close'' orders. The Exchange has committed to address these errors formally in an amendment to the proposed rule change following publication of this notice. Telephone conversation among John Curtain, Assistant Vice President Corporate Legal and Contracts Attorney, BSE; Jennifer Colihan, Special Counsel, Division of Market Regulation (''Division''), Commission; and David Michehl, Special Counsel, Division, Commission on June 22, 2006.

(B) ''Cross with Size'': A Cross Order to buy and sell at least 5,000 shares of the same security with a market value of at least $100,000.00 (i) at a price equal to or better than the best bid or offer displayed in BeX and the National Best Bid or Offer (ii) where the size of the order is larger than the aggregate size of all interest displayed in BeX at that price; and (iii) where neither side of the order is for the account of the BSE Member sending the order to BeX.

(C) ''Good 'Till Date (GTD)'': An order to buy or sell that, if not executed, expires at the end of date specified in the order.

(D) ''Good 'Till Time (GTT)'': An order to buy or sell that, if not executed, expires at the time specified in the order.

(E) ''Limit or Close'': A limit order to buy or sell that if not executed prior to the Market on Close cutoff time of 3:40 p.m., pursuant to Chapter II, Section 22, will automatically convert to an At the Close Order for inclusion in the closing process and if not so executed, at the close, will be cancelled.

(F) ''Mid-Point Cross'': A two-sided order with both a buy and sell component combined that executes at the midpoint of the National Best Bid or Offer. A Mid-point Cross Order will be rejected when a locked or crossed market exists in that security at the time the Order is received. Midpoint Cross Orders may be executed and reported in increments as small as one-half of the Minimum Price Variation.

(d) Orders may be entered by a Member on its own behalf, for the account of another Member (collectively, professional orders) or for the account of a customer (an agency order). In BeX, however, agency orders are subject to the same display and execution processes as professional orders, and agency orders do not receive any priority in order execution or handling.

** * * Interpretations and Policies*

.01 The terms ''Best Bid'' and ''Best Offer'' shall mean, respectively, the highest and lowest priced order to buy and sell an eligible security in BeX.

.02 The terms ''National Best Bid'' and ''National Best Offer'' shall mean, respectively, the highest and lowest priced order or quote to buy and sell a BeX eligible security displayed in the consolidated quotation system for the security.

Section 3. Operation of BeX

(a) Operating Hours. BeX will operate from 7:30 a.m. until 4:30 p.m during the Exchange's Pre-Opening, Opening, Primary and Post-Primary Trading Sessions.

(i) For purposes of this Chapter XXXVII, the primary market for a security is, unless otherwise designated by the appropriate Board committee, the listing market for a security; provided, however, that if a security is traded by the NYSE, then the primary market for such security is the NYSE, and if a security is not traded by the NYSE and is traded by the Amex, then the primary market for such security is the Amex. If a security is solely listed on any other Exchange, then the primary market for such security is that market. If a security is traded on both the NYSE and the Amex, whichever of the two is the listing market is the primary market.

(b) Pre-Opening. BeX will accept orders each day during the Pre-Opening. The Pre-Opening in BeX extends from 7:30 a.m. until 9:30 a.m. During the Pre-Opening, orders are placed on the BeX but will not be matched and do not generate trade executions. Market participants are permitted to add, modify or cancel orders. Cross, Cross with Size, and Mid-point Cross Orders do not participate in the opening and are not accepted by the BeX trading system during the Pre-Opening.

(c) Opening. BeX will open for trading each day once the primary market for a security opens its market on either a displayed quote or trade.

Primary Market Opening Procedures (PMOP). Where the opening price is based on a trade print in the primary market, the BeX opening price will match the primary market opening price for each individual security opened. Once the BeX opening price has been determined, all eligible orders priced equal to or better than the BeX opening price will be paired for execution at the determined price following applicable BeX priority rules.

Where the primary market opening is based on a quote, the BeX will open as follows:

(i)(a) Where there are orders in the BeX that cannot be matched, the BeX will open on a quote;

(i)(b) Where there are orders in the BeX that can be matched, (such as a Market Order to Market Order, Limit Order to Market Order, or Limit Orders that lock or cross) the BeX opening price will be the Theoretical Opening Price (''TOP''), provided the TOP is at or within the National Best Bid and Offer;

(i)(c) Where there are orders in the BeX that can be matched, and the TOP is not at or within the National Best Bid and Offer, the BeX opening trade price will be at the National Best Bid or Offer closest to the TOP so long as Orders can be matched at that price. If Orders cannot be matched at that price, the BeX will open on a quote.

(ii) Following the opening execution process in an individual security, all orders remaining that are executable against the National Best Bid and Offer will be cancelled or routed in accordance with the customer's instruction. All other Orders will be booked on the BeX.

(iii) The TOP.

(a) The TOP is the price that maximizes the quantity of orders traded on the BeX at the opening;

(b) If multiple prices exist under subparagraph (a), above, then the TOP is the price that minimizes the quantity of orders not traded;

(c) If multiple prices exist under subparagraph (b), above, then the price that minimizes any order imbalance is the TOP;

(d) If multiple prices exist under subparagraph (b) and there is no order imbalance, the TOP is the price closest to the previous day's closing price.

(d) Primary Trading Session. BeX will operate the Primary Trading Session immediately following the opening for individual securities where the primary market is either the NYSE or AMEX. During the primary session, orders are automatically executed as soon as a match can be found, following applicable BeX priority rules.

(e) Trading Halts. BeX will halt trading during regulatory trading halts called by the primary or listing market in a security. Additionally, BeX will halt its operation during periods of unusual market conditions pursuant to Chapter II, Section 34A. If trading in an issue has been halted, BeX will go through its Pre-Opening and Opening procedures as set forth above.

(f) Closing. BeX will close as follows:

(i) Market on Close Period: Beginning at 3:40 p.m. (EST), BeX will broadcast the imbalance between the At the Close and Limit or Close Orders on the bid side and the At the Close and Limit or Close Orders on the sell side.

(A) During this period At the Close Orders will only be accepted on the imbalance side.

(B) During this period At the Close and Limit or Close Orders cannot be cancelled.

(ii) BeX will provide a group closing by putting all eligible orders received by 4:00 p.m. into an ''Authorized Reserve State (ARS).'' During ARS, BeX will not accept any new orders, cancellations or modifications. When BeX receives the closing price message from the primary market, as defined in Section 3(a)(i) above, the BeX trading system will complete the closing process for each individual security. During the closing process, all paired At the Close and Limit or Close Orders are executed at

the primary market closing price. If a Market or Limit or Close Order is not fully executed at the close, the part not executed will be cancelled.

(g) Post-Primary Trading Session (PPS). The BeX PPS will operate from the time when the primary market disseminates its closing price until 4:30 p.m. During the BeX PPS only cross orders at a specific price may be submitted.

(h) Receipt of Orders. Orders shall be routed to BeX using one of the following methods:

(i) Except for the orders described in subparagraph (ii) below, all orders must be sent to BeX through the Exchange's systems or through other communication lines approved by the Exchange for the delivery of orders by its Members.

(ii) ITS commitments for ITS-eligible securities traded in BeX shall be sent through the ITS system.

(i) Ranking and Display of Orders. Except for Cross, Cross with Size, and Mid-point Cross Orders, which shall be executed as described in Paragraph (k) below, all orders sent to BeX shall be ranked according to their price and time of receipt, as follows:

(i) Limit Orders shall be ranked based on their limit prices and times of receipt by BeX.

(ii) All eligible orders shall be immediately and publicly displayed through the processes set out in the appropriate transaction reporting plan for each security when they constitute the best bid or offer in BeX for that security, provided, however, that an order that would lock or cross another ITS market shall be cancelled rather than displayed.

(j) Automated Matching and Execution of Orders. Orders shall automatically be matched and executed against each other, as follows:

(i) Except for Cross, Cross with Size, and Mid-point Cross Orders, which shall be executed as described in Paragraph (k) below, an incoming order shall be matched against one or more orders in the BeX in the order of their ranking, following price and time priority for the full amount of shares available at that price, or for the size of the incoming order, if smaller. If an incoming Limit Order would trade through (as defined in the ITS Plan) the National Best Bid or Offer if executed on the BeX at the time of receipt, it will, at the instruction of the Member entering the order, either be cancelled or routed to the market(s) displaying the National Best Bid or Offer. If no instruction is provided, the order will be returned to Member entering the order.

(ii) If an incoming Limit Order cannot be matched when it is received and it is not designated as a type that should be immediately cancelled the order shall be treated in accordance with Section 3, Paragraph (i) above.

(iii) If an incoming Market Order would trade-through (as defined in the ITS Plan) the National Best Bid or Offer if executed on the BeX at the time of receipt, it will, at the instruction of the Member entering the order, either be cancelled or routed to the market(s) displaying the National Best Bid or Offer.

(iv) An inbound ITS commitment, if it is priced at or better than the current Best Bid or Offer in BeX, shall be automatically executed against the order(s) reflected in the Best Bid or Offer, for the full amount of shares available at that price, and any remaining portion of the ITS commitment shall be automatically cancelled.

(v) Orders shall only be matched at prices that are equal to, or better than, the National Best Bid or Offer.

(k) Submission of Cross Orders. Cross, Cross with Size, and Mid-point Cross Orders shall be automatically executed if they meet the requirements set out in Section 2(c)(ii)(A), (B) and (F) above. If an order designated as Cross, Cross with Size, or Mid-point Cross does not meet such requirements at the time it is received by BeX, it shall be immediately cancelled.

Section 4. Cancellation of Transactions

(a) Cancellation of Transactions. A transaction made in demonstrable error and cancelled by both parties may be unwound, subject to the approval of the Exchange. Unresolved controversies relating to transactions that occur in BeX, and which are not addressed pursuant to the procedures in Section 5, Paragraph (a) below shall be subject to the arbitration rules of the Exchange set out in Chapter XXXII of the Rules.

Section 5. Handling of Clearly Erroneous Transactions

(a) Handling of Clearly Erroneous Transactions. The Exchange will respond to requests for review of clearly erroneous transactions using the following procedures:

(i) The terms of a transaction are ''clearly erroneous'' where there is an obvious error in any term, such as price, number of shares or other unit of trading, or identification of the security.

(ii) Any Member may request a review of an execution received through BeX when the Member believes that the terms of the transaction were clearly erroneous when submitted.

(A) The Member must make a request for review immediately after the execution and also must provide a written request, by facsimile or by e-mail, within 15 minutes after the execution.

(B) The Exchange shall promptly notify the other party to the transaction of the request for review.

(C) The Member making a request for review shall provide, within 30 minutes after making the written request for review (or within such longer period of time specified by Exchange staff), written documentation relating to the disputed transaction that is reasonably necessary for use by the Exchange in resolving the matter. The other party to the transaction shall provide, within 30 minutes after receiving notice from the Exchange of the request for review (or within such longer period of time specified by Exchange staff), written documentation relating to the disputed transaction that is reasonably necessary for use by the Exchange in resolving the matter. Once a party has submitted its documentation, and the period for providing the documentation has ended (or, if earlier, the party has notified the Exchange that it has no further information), the party may not provide additional information unless requested to do so by Exchange staff. Either party to the transaction may request, and the Exchange shall provide, the written documentation submitted by the other party.

(D) The Exchange's Chief Regulatory Officer (''CRO'') or another officer designated by the CRO shall review the transaction and determine whether it is clearly erroneous. In making that determination, the CRO or another officer designated by the CRO shall consider the goals of maintaining a fair and orderly market and the protection of investors and the public interest.

(E) If the CRO or another officer designated by the CRO determines that a transaction is not clearly erroneous, the Exchange shall notify both parties, in writing, that no action will be taken with respect to the completed trade. If the CRO or another officer designated by the CRO determines that a transaction is clearly erroneous, the CRO or another officer designated by the CRO shall declare the transaction null and void or modify one or more of the terms of the transaction with the aim of trying to return the parties to the positions that they would have been in (or to positions reasonably similar to those positions) if the error had not occurred. The Exchange shall document this decision in writing and provide copies of the decision to all parties.

(iii) Either party may appeal this determination to a subcommittee of the Exchange's Regulatory Oversight Committee (''ROC'') by submitting an appeal to the Exchange's Secretary, by facsimile or in writing, within 30 minutes after receiving the Exchange's written decision or, if the Exchange notifies parties of its decision after 4 p.m., by 9:30 a.m. the next trading day. Once an appeal is received, the Exchange shall notify the counterparty to the trade and both parties and the Exchange itself will be permitted to submit any additional supporting written materials up to the time that the subcommittee considers the appeal. Either party to a disputed trade may request, and the Exchange shall provide, the written documentation presented to the subcommittee by the other party or by the Exchange. An appeal does not operate as a stay on the decision being appealed. After consideration of any written materials provided by the parties or by the Exchange, and after any hearings that the subcommittee may hold, the subcommittee, using the standards set out in this rule, shall affirm, modify or reverse the original decision. The subcommittee's decision on a matter shall be the final Exchange action on the matter. Any decision by the CRO or another officer designated by the CRO under subparagraph (ii) above or by the ROC subcommittees under this subparagraph (iii) shall be rendered without prejudice as to the rights of the parties to the transaction to submit their dispute to arbitration.

(iv) If there is any disruption or malfunction in the use or operation of BeX, or the communications systems associated with BeX, the CRO or another officer designated by the CRO may declare any transaction arising out of the use of BeX during the period of the disruption or malfunction null and void or may modify the terms of these transactions. In making this decision, the CRO, or any designee, must find that the transactions were clearly erroneous or that the actions are necessary for the maintenance of a fair and orderly market or the protection of investors and the public interest. Absent extraordinary circumstances, any action by the CRO or other designee shall be taken within 30 minutes of detection of the erroneous transaction, but in no event later than 3 p.m. on the trading day following the date of the trade at issue. The Exchange shall notify each Member involved in the transaction as soon as practicable following the decision and any party to the transaction may appeal that decision by following the procedures set out above in subparagraph (iii) of this rule.

Section 6. Orders To Be Reduced and Increased on Ex-Date

(a) When a security is quoted ex-dividend, ex-distribution, ex-rights or ex-interest, the following kinds of orders shall be reduced by the value of the payment or rights, and increased in shares in the case of stock dividends and stock distributions which result in round-lots, on the day the security sells ex:

(i) Open buying orders;

(ii) Open stop orders to sell. (With open stop limit orders to sell, the limit, as well as the stop price, shall be reduced.) The following shall not be reduced:

(i) Open stop orders to buy;

(ii) Open selling orders.

(b) Reduction of orders, Odd amounts. When the amount of a cash dividend is not equivalent to or is not a multiple of the fraction of a dollar in which bids and offers are made in the particular stock, orders shall be reduced by the next higher variation.

(c) Reduction of orders, Proportional procedure. Open buy orders and open stop orders to sell shall be reduced by the proportional value of a stock dividend or stock distribution on the day a security sells ex-dividend or ex-distribution. The new price of the order is determined by dividing the price of the original order by 100% plus the percentage value of the stock dividend or stock distribution. For example, in a stock dividend of 3%, the price of an order would be divided by 103%.

The chart below lists, for the more frequent stock distributions, the percentages by which the prices of open buy orders and open stop orders to sell shall be divided to determine the new order prices.

Distribution	Price of order divided by	Distribution	Price of order divided by
5-for-4	125%	2-for-1	200%
4-for-3	133⅓%	5-for-2	250%
3-for-2	150%	3-for-1	300%
5-for-3	166⅔%	4-for-1	400%

If as a result of this calculation the price is not equivalent to or is not a multiple of the fraction of a dollar in which bids and offers are made in the particular security, the price should be rounded to the next lower variation.

In reverse splits, all orders (including open sell orders and open stop orders to buy) should be cancelled.

(d) Procedure for increase in number of shares. When there is a stock dividend or stock distribution, open buy orders and open stop orders to sell shall be increased in shares as follows:

(i) When there is a stock dividend or stock distribution which results in one or more full shares for each share held, the number of shares in open buy orders and open stop orders to sell shall be increased accordingly.

EXAMPLES:

A 3-for-1 stock distribution.

An order for 100 shares is increased to 300 shares.

An order for 200 shares is increased to 600 shares.

An order for 500 shares is increased to 1500 shares.

(ii) When there is a stock dividend or stock distribution of less than a one-for-one basis and thus results in fractional shares, open buy orders and open stop orders to sell shall be increased to the lowest full round-lot.

EXAMPLES:

A 25% stock dividend or a 5-for-4 stock distribution.

An order for 100 shares remains at 100 shares.

An order for 300 shares remains at 300 shares.

An order for 900 shares is increased to 1100 shares.

An order for 2000 shares is increased to 2500 shares.

(iii) When there is a stock dividend or stock distribution which results in fractional shares combined with full shares, the number of shares in open buy orders and open stop orders to sell shall be increased to the lowest full round-lot.

EXAMPLES:

A 5-for-2 stock distribution.

An order for 100 shares is increased to 200 shares.

An order for 200 shares is increased to 500 shares.

An order for 700 shares is increased to 1700 shares.

An order for 1200 shares is increased to 3000 shares.

Section 7. Application of BSE Rules

(a) The rules and procedures in this Chapter shall apply to trading conducted in BeX. Unless otherwise defined in this Chapter, terms used in this Chapter shall have the same meanings given them elsewhere in the Rules. Except where the context requires otherwise, the provisions of the bylaws and all other Rules and policies of the Board of Governors shall continue to be applicable to trading that occurs on the BeX. If any rule in this Chapter is inconsistent with any other provision of the Rules, the provisions of this Chapter shall control and shall be deemed to supplement or amend the inconsistent provision.

II. Self-Regulatory Organization's Statement of the Purpose of, and Statutory Basis for, the Proposed Rule Change

In its filing with the Commission, the Exchange included statements concerning the purpose of, and basis for, the proposed rule change, as amended, and discussed any comments it received on the proposed rule change, as amended. The text of these statements may be examined at the places specified in Item IV below. The Exchange has prepared summaries, set forth in Sections A, B, and C below, of the most significant aspects of such statements.

A. Self-Regulatory Organization's Statement of the Purpose of, and Statutory Basis for, the Proposed Rule Change

1. Purpose

The BSE has proposed in a separate rule filing, to create a new electronic trading facility, as that term is defined in section 3(a)(2) of the Act,[8] called BeX.[9] BeX, which is to be developed, owned and operated by BSX Group, LLC (''BSX''), would be an electronic securities communications and trading facility intended for the use of BSE Members and Electronic Access Members and their customers. In this rule filing relating to the initial phase of the BeX facility, the Exchange proposes to implement the BeX as a fully-automated electronic book for the display and execution of orders in securities listed on any exchange other than issues listed on Nasdaq for which the BSE obtains unlisted trading privileges after June 30, 2006. All such issues would not be assigned to a specialist. The rules would be located in Chapter XXXVII of the Exchange's Rules of the Board of Governors.[10]

Under the Exchange's current rules there are no provisions for trading securities that are not assigned to a specialist. Rather than instituting a ''Cabinet'' rule, which the Exchange considers to be manually intensive and inefficient, the Exchange proposes to institute rules governing the BeX as a new fully-automated electronic book that would display and match eligible orders in these securities, without the participation of a specialist. For competitive reasons, the Exchange considers this proposal to be vitally important to its ability to attract to, and retain order flow by, the BSE.

Currently, BSE Specialists quote and trade approximately 300 securities. The BSE Floor Broker community routinely receives baskets of securities that contain orders and cross trades in securities that are not quoted by BSE Specialists. As such, the orders and cross trades for securities that are not traded on the BSE must be routed to other market centers for execution. Thus, the Exchange is not able to retain order flow that has been directed to the BSE. Moreover, BSE Floor Brokers are hampered in their ability to attract more sources of order flow to the Exchange, because a percentage of the order flow they do attract is eventually routed to other market centers for execution. The other market centers include those centers that have the capability to post and execute orders in securities that are not continuously quoted or traded by any member in a market making capacity, including other exchanges that have rules governing the same type of electronic book functionality that the BSE is now seeking to employ.[11]

As described below, BeX would allow Exchange Members, whether or not they are on the Exchange's floor, to enter orders into the BeX for possible execution.

Eligible securities and eligible orders. Under the proposed rules, all securities eligible for trading on the Exchange that are not assigned to a Specialist would be traded in the BeX. Orders sent to BeX would be required to be specifically designated for handling in BeX. BeX would accept only round-lot market and limit orders.[12] No odd-lot, or mixed lot orders would be accepted.

Orders eligible for execution in BeX may be designated as one of the following existing BSE order types: ''at the close,'' ''at the opening or at the opening only,'' ''day,'' ''do not increase (DNI),'' ''do not reduce (DNR),'' ''fill or kill,'' ''good 'till cancel,'' ''immediate or cancel,'' ''limit, limited or limited price,'' ''market,'' ''stop limit,'' or ''stop'' orders. Orders may also be designated one of the following new order types: ''cross,'' ''cross with size,'' ''good 'till date (GTD),'' ''good 'till time (GTT),'' ''limit or close,'' or ''mid-point cross.'' Descriptions of the eligible new order types are as follows:

Cross: An order to buy and sell the same security at a specific price better than the best bid and offer displayed in BeX and equal to or better than the National Best Bid and Offer. A Cross Order may represent interest of one or more BSE Members.

Cross with Size: A Cross Order to buy and sell at least 5,000 shares of the same security with a market value of at least $100,000.00 (i) at a price equal to or better than the best bid or offer displayed in BeX and the National Best Bid or Offer; (ii) where the size of the order is larger than the aggregate size of all interest displayed in BeX at that price; and (iii) where neither side of the order is for the account of the BSE Member sending the order to BeX. The latter provision is intended to restrict such orders to agency orders, similar to the existing BSE, Chx, and American Stock Exchange (''Amex'') rules.[13]

Good 'Till Date (GTD): An order to buy or sell that, if not executed, expires at the end of the date specified in the order.

Good 'Till Time (GTT): An order to buy or sell that, if not executed, expires at the time specified in the order.

Limit or Close: A Limit Order to buy or sell that if not executed prior to the Market on Close cutoff time of 3:40 p.m., pursuant to Chapter II, Section 22, will automatically convert to an At the Close Order for inclusion in the closing process, and if not so executed at the close, will be cancelled.

Mid-Point Cross: A two-sided order with both a buy and sell component combined that trades at the midpoint of the National Best Bid or Offer. A Mid-point Cross Order will be rejected when

[8] Under the Act, the ''term 'facility' when used with respect to an exchange includes its premises, tangible or intangible property whether on the premises or not, any right to the use of such premises or property or any service thereof for the purpose of effecting or reporting a transaction on an exchange (including, among other things, any system of communication to or from the exchange, by ticker or otherwise, maintained by or with the consent of the exchange), and any right of the exchange to the use of any property or service.'' *See* 15 U.S.C. 78c(a)(2).

[9] On May 5, 2006, the Exchange filed with the Commission a proposed rule change that establishes BeX and sets forth governance and membership rules changes pertaining to BeX (SR–BSE–2006–20).

[10] *See note* 6, *supra*, for a description of the scope of this proposal.

[11] *See, e.g.*, Chicago Stock Exchange (''Chx'') Rules, Article XXA.

[12] *Id.*

[13] BSE Rule Chapter II, Sec. 8 and Chapter XXV, Sec. 6; Amex Rule Sec. 126.02, and Chx Rule Article XXA, Rule 2(c)(4).

a locked or crossed market exists in that security at the time the Order is received. Mid-point Cross Orders may be executed and reported in increments as small as one-half of the Minimum Price Variation.

With the exception of Fill or Kill and Immediate or Cancel Orders, a customer may append to an Order an instruction that the Order be cancelled or routed to the market(s) displaying the National Best Bid or Offer if the Order would trade through the National Best Bid or Offer if executed on the BeX.

Compliance with Intermarket Trading System (''ITS'') Plan. To ensure compliance with the ITS Plan, otherwise eligible orders would be cancelled or routed away in certain circumstances. Specifically, if an order in an ITS eligible security crosses or locks the National Best Bid or Offer at the time that it is received, the order would be immediately cancelled to ensure compliance with the ITS Plan's rules relating to locked markets.[14] Marketable orders that would trade-though the National Best Bid or Offer would either be cancelled or be routed to the market(s) showing the National Best Bid or Offer at the order-entering firm's instructions.[15]

Operating hours. Under the proposed rules, BeX would operate during the Exchange's Pre-Opening, Opening, Primary, and Post-Primary Trading Sessions. Specifically, BeX would accept orders each day during the Pre-Opening. BeX will open for trading each day for a particular security once the primary market in that security opens on either a displayed quote or a trade.[16] BeX would close at 4:30 p.m.

Pre-Opening. The Pre-Opening in BeX would extend from 7:30 a.m. until 9:30 a.m., during which orders would be entered on the BeX and market participants would be able to add, modify or cancel orders. There would be no matching of orders during the Pre-Opening.

Opening. BeX will open based upon the opening of the primary market for a security.[17] Where the opening price is based on a trade print in the primary market, the BeX opening price will match the primary market opening price for each individual security opened. Where the opening is based on a quote in the primary market, the BeX will open in one of the following ways: (1) Where there are orders in the BeX that cannot be matched, the BeX will open on a quote; (2) where there are orders in the BeX that can be matched, the BeX opening price will be the Theoretical Opening Price (''TOP''), provided the TOP is at or within the National Best Bid and Offer; (3) where there are orders in the BeX that can be matched, and the TOP is not at or within the National Best Bid and Offer, the BeX opening trade price will be at the National Best Bid or Offer closest to the TOP so long as Orders can be matched at that price. If Orders cannot be matched at that price, the BeX will open on a quote; (4) following the opening execution process in an individual security all orders remaining that are executable against the National Best Bid and Offer will be cancelled or routed in accordance with the customer's instruction. All other Orders will be booked on the BeX.

Primary Trading Session. Once the opening occurs for individual securities, BeX will operate the Primary Trading Session. All orders would automatically be matched following price and time priority as soon as they are entered in the order book. Incoming orders will be executed at or within the National Best Bid and Offer.

Closing. BeX will close in two stages. The first stage is the ''Market on Close Period''. Beginning at 3:40 p.m. (EST), BeX will broadcast the imbalance between the At the Close and Limit or Close Orders on the bid side and At the Close and Limit on Close Orders on the offer side.

Second, BeX will close based upon the primary market close.[18] BeX will provide a group closing by putting all eligible orders in such securities received by 4 p.m. into an Authorized Reserve State. When BeX receives the closing price message from the primary market, the BeX trading engine will complete the closing process for each individual security.

Post-Primary Trading Session. The Post-Primary Trading Session would operate from the time when the primary market disseminates its closing price until 4:30. During the Post Primary Trading Session only Cross Orders may be submitted to BeX.

Receipt of orders. Orders could be routed to BeX through the Exchange's systems or through other communications lines approved by the Exchange for the delivery of orders by Exchange Members.[19] BeX would also accept and automatically execute commitments sent by market centers that participate in ITS.

Ranking and display of orders. Except for Cross, Cross with Size, and Mid-point Cross Orders, all orders sent to BeX would be ranked according to their price and time of receipt and would be displayed to the public when they constitute the Best Bid or Offer in BeX for a security.[20]

Automated matching of orders. In BeX, orders would automatically match against each other, in price/time priority.[21] Specifically, an incoming order would be matched against one or more orders in the BeX, in the order of their ranking, at the price of each order, for the full amount of shares available at that price, or for the size of the incoming order, if smaller. If an incoming order could not be matched when it is received, and it is not designated as an order that should be immediately cancelled, the order would be placed in the BeX. For example:

Assume that BeX contains the following bids and offers in a particular security, AAA:

Buy	Price	Price	Sell
200	$47.50	$48.20	400
1,500	47.00	48.50	700

[14] Similarly, if an order in a listed security locks or crosses the Best Bid or Offer in BeX at the time it is received, but not the National Best Bid or Offer, the order would be executed according to BeX's matching algorithm, and any remaining portion would be immediately cancelled, if it would lock or cross the National Best Bid or Offer.

[15] *See* proposed BSE Rule, Chapter XXXVII, Section 3, Paragraph (j)(i) and (iii).

[16] The proposed rules define the primary market as the listing market for a security, unless otherwise designated by the appropriate Board committee; provided, however, that if a security is traded by the New York Stock Exchange, Inc. (''NYSE''), then the primary market for such security would be the NYSE and if a security is traded by the Amex, then the primary market for such security would be the Amex. If a security is traded on both the NYSE and the Amex, whichever of the two is the listing market would be considered the primary market. See proposed BSE Rule, Chapter XXXVII, Section 3, Paragraph (a)(i).

[17] The primary market is defined as either the NYSE, the Amex, or another exchange solely listing a security (other than the BSE). Nasdaq securities and BSE solely listed issues (which are assigned to a specialist) will continue to trade under the BSE's existing rules, and not on BeX, so this rule proposal does not provide opening or closing rules for such securities.

[18] *Id.*

[19] *See* proposed BSE Rule, Chapter XXXVII, Section 3, Paragraph (h)(i).

[20] *See* proposed BSE Rule, Chapter XXXVII, Section 3, Paragraph (i).

[21] The only exception to this price/time priority matching would occur when certain ''cross with size'' orders are executed. In those instances, eligible ''cross with size'' transactions—where there is an order to buy and sell at least 5,000 shares of the same security with a market value of at least $100,000.00 (A) at a price equal to or better than both the National Best Bid and Offer and the Best Bid and Offer displayed in BeX; (B) where the size of the order is larger than the aggregate size of all interest displayed in BeX at that price; and (C) where neither side of the order is for the account of the BSE Member sending the order to BeX—could execute at the price of orders in BeX, without executing those earlier-received orders. Because this type of crossing transaction is permitted on the floor of the Exchange today, the Exchange believes it is appropriate to include this transaction type in BeX.

Buy	Price	Price	Sell
600	46.75	49.00	100

—An incoming Limit Order to buy 500 shares at a price of $48.00 would become the top-of-the-book best bid.
—An incoming Limit Order to buy 500 shares at a price of $48.20 would match for 400 shares against the top-of-the-book best offer at a price of $48.20, leaving 100 shares to buy at $48.20.
—Similarly, an incoming Limit Order to buy 500 shares at a price of $48.50 would match for 400 shares against the top-of-the-book best offer at a price of $48.20 and would match for 100 shares at a price of $48.50.

Inbound ITS commitments, if priced at or better than the current Best Bid or Offer in BeX, would be automatically executed against the order(s) reflected in the Best Bid or Offer for the full amount of shares at that price, and any remaining portion of the ITS commitment would be automatically cancelled.[22]

Cross, Cross with Size and Mid-point Cross Orders would be automatically executed if they meet the requirements for those types of orders. If they do not meet applicable requirements, they would be immediately cancelled.

No distinction between agency and professional orders. Under the proposed rules, agency orders (entered on behalf of a customer) and professional or proprietary orders (entered for the account of a BSE Member (or other broker-dealer)) would be handled in an identical way in BeX's matching algorithms.[23]

Cancellations of transactions and handling of clearly erroneous transactions. Under the proposed rules, Members that make a transaction in demonstrable error could agree to cancel and unwind the transaction, subject to the approval of the Exchange.[24] For purposes of BeX, the Exchange also proposes to adopt a policy for the handling of clearly erroneous transactions.[25] This policy would allow the Exchange's Chief Regulatory Officer (''CRO'') or another officer designated by the CRO to (a) review and potentially modify or cancel executions where one party believes that the terms of the transaction were clearly erroneous when submitted; and (b) modify or cancel executions that result from a disruption or malfunction in the use or operation of BeX, or any communications system associated with the BeX.

The proposed rules set out procedures for each of these reviews, including specific means for Members to appeal the Exchange's decisions.[26]

Adjustment of Orders on Ex-Dates

The Exchange is proposing to adopt the standard process for adjusting orders on ex-dates.[27] For example, open buy orders are reduced by the value of a cash dividend on the ex-dividend date. If the amount of the cash dividend is not equivalent to or is not a multiple of the fraction of a dollar in which bids and offers are made in the stock, open buy orders will be reduced by the next higher variation. The proposed rule text sets forth charts and examples.

Conclusion

The Exchange represents that it has designed BeX to be a fully-automated system that would permit eligible orders in eligible securities to match against one another, without the required participation of a Specialist. The Exchange believes that this system functionality would provide all Exchange Members with an efficient way to trade securities that would protect investors and the public interest by automatically handling orders in a fair and reasonable manner.

2. Statutory Basis

The Exchange believes that the proposed rule change is consistent with section 6(b) of the Act,[28] in general, and furthers the objectives of section 6(b)(5),[29] in particular, in that it is designed to promote just and equitable principles of trade, to remove impediments to and perfect the mechanism of a free and open market and a national market system; and, in general, to protect investors and the public interest.

B. Self-Regulatory Organization's Statement on Burden on Competition

The Exchange does not believe that the proposed rule change, as amended, will impose any burden on competition not necessary or appropriate in furtherance of the purposes of the Act.

C. Self-Regulatory Organization's Statement on Comments on the Proposed Rule Change Received from Members, Participants or Others

The Exchange has neither solicited nor received comments on the proposed rule change, as amended.

III. Date of Effectiveness of the Proposed Rule Change and Timing for Commission Action

Within 35 days of the date of publication of this notice in the **Federal Register** or within such longer period (i) as the Commission may designate up to 90 days of such date if it finds such longer period to be appropriate and publishes its reasons for so finding or (ii) as to which the self-regulatory organization consents, the Commission will:

A. By order approve such proposed rule change, as amended; or

B. Institute proceedings to determine whether the proposed rule change, as amended, should be disapproved.

IV. Solicitation of Comments

Interested persons are invited to submit written data, views, and arguments concerning the foregoing, including whether the proposed rule change, as amended, is consistent with the Act. Comments may be submitted by any of the following methods:

[22] *See* proposed BSE Rule, Chapter XXXVII, Section 3, Paragraph (j)(iii).

[23] *See* proposed BSE Rule, Chapter XXXVII, Section 2, paragraph (d). *See also* Chx Rule, Article XXA, Rule 2, paragraph (d). The Exchange believes that this handling is appropriate because BeX is a fully-automated functionality of the Exchange. Orders for BeX would be submitted directly and electronically to the Exchange. Once transmitted, an order could be cancelled, but a Member could not influence the execution of that order in any way. The orders would enter a line of other orders to be matched against one another based on an established algorithm. As did the Chx when it proposed its Ebook rule change, the BSE is seeking an exemption under Rule 11a2–2(T) for this part of this rule filing.

[24] *See* proposed BSE Rule, Chapter XXXVII, Section 4, Paragraph (a).

[25] *See* proposed BSE Rule, Chapter XXXVII, Section 5, Paragraph (a).

[26] For example, a Member seeking review of a ''clearly erroneous'' transaction would be required to notify the Exchange of the request, by telephone and in writing, promptly after the execution. After the CRO or another officer designated by the CRO reviewed the transaction, the Exchange would notify both parties of the CRO's or designee's decision, in writing. Either party could appeal the decision to a subcommittee of the Exchange's Regulatory Oversight Committee (''ROC''), whose decision would be final. In making their decisions, the CRO, CRO's designee, and the ROC Subcommittee would consider the goals of maintaining a fair and orderly market and protecting investors and the public interest. If it is determined that a transaction was clearly erroneous, the CRO, CRO designee, or the ROC Subcommittee would try to return the parties to the positions that they would have been in (or positions reasonably similar to those positions) if the error had not occurred. Similarly, in the event of disruption or malfunction that impacts the operation or use of BeX, the CRO or CRO designee could act promptly to declare transactions void or to modify transactions. The Exchange would be required to notify each Member involved in the transaction as soon as practicable after the CRO or CRO designee makes any decision. Decisions could be appealed using the procedure set out for the review of decisions addressing clearly erroneous transactions.

[27] *See* proposed BSE Rules, Chapter XXXVII, Section 6. These proposed rules are based on NYSE Rule 118.

[28] 15 U.S.C. 78f(b).

[29] 15 U.S.C. 78f(b)(5).

Electronic Comments

• Use the Commission's Internet comment form (*http://www.sec.gov/rules/sro.shtml*); or

• Send an e-mail to *rule-comments@sec.gov.* Please include File Number SR–BSE–2006–22 on the subject line.

Paper Comments

• Send paper comments in triplicate to Nancy M. Morris, Secretary, Securities and Exchange Commission, Station Place, 100 F Street, NE., Washington, DC 20549–1090.

All submissions should refer to File Number SR–BSE–2006–22. This file number should be included on the subject line if e-mail is used. To help the Commission process and review your comments more efficiently, please use only one method. The Commission will post all comments on the Commission's Internet Web site (*http://www.sec.gov/rules/sro.shtml*). Copies of the submission, all subsequent amendments, all written statements with respect to the proposed rule change that are filed with the Commission, and all written communications relating to the proposed rule change between the Commission and any person, other than those that may be withheld from the public in accordance with the provisions of 5 U.S.C. 552, will be available for inspection and copying in the Commission's Public Reference Room. Copies of such filing also will be available for inspection and copying at the principal office of the Exchange. All comments received will be posted without change; the Commission does not edit personal identifying information from submissions. You should submit only information that you wish to make available publicly. All submissions should refer to File Number SR–BSE–2006–22 and should be submitted on or before July 20, 2006.

For the Commission, by the Division of Market Regulation, pursuant to delegated authority.[30]

Nancy M. Morris,

Secretary.

[FR Doc. E6–10242 Filed 6–28–06; 8:45 am]

BILLING CODE 8010–01–P

[30] 17 CFR 200.30–3(a)(12).

SECURITIES AND EXCHANGE COMMISSION

[Release No. 34–54029; File No. SR–NYSE–2005–68]

Self-Regulatory Organizations; New York Stock Exchange, Inc. (a/k/a New York Stock Exchange LLC); Notice of Filing of Proposed Rule Change Relating to Annual Financial Statement Distribution Requirements and Listed Company Manual Sections 103.00, 203.00, 203.01, 203.02, 203.03, 204.00 Through .33, 303A.14, 313.00, 401.04, and 703.09

June 21, 2006.

Pursuant to Section 19(b)(1) of the Securities Exchange Act of 1934 (''Act'')[1] and Rule 19b–4 thereunder,[2] notice is hereby given that on September 30, 2005, the New York Stock Exchange, Inc. (''NYSE'' or ''Exchange'') filed with the Securities and Exchange Commission (''Commission'') the proposed rule change as described in Items I, II, and III below, which Items have been prepared by the NYSE. On June 9, 2006, the Exchange filed Amendment No. 1 to the proposed rule change.[3] The Commission is publishing this notice to solicit comments on the proposed rule change, as amended, from interested persons.

I. Self-Regulatory Organization's Statement of the Terms of Substance of the Proposed Rule Change

The Exchange's proposed rule change reflects amendments that eliminate the current NYSE Listed Company Manual requirement that listed companies distribute an annual report to shareholders, specify more precisely certain requirements applicable to listed foreign private issuers, amend the Exchange's requirements for notices to and filings with the Exchange, add a new section to the Listed Company Manual that specifically requires listed companies to have and maintain a Web site, and reorganize and eliminate certain sections of the Listed Company Manual.[4]

[1] 15 U.S.C. 78s(b)(1).

[2] 17 CFR 240.19b–4.

[3] In Amendment No. 1, the NYSE eliminated from the present filing other proposed rule changes to Sections 103 and 302 of the Listed Company Manual, and clarified certain details of its proposal. Amendment No. 1 replaced and superseded NYSE's original filing in its entirety.

[4] *See* Telephone Conversation between Annemarie Tierney, Assistant General Counsel, NYSE, and Raymond Lombardo, Special Counsel, Division of Market Regulation, Commission and Rahman Harrison, Special Counsel, Division of Market Regulation, Commission, on June 20, 2006.

The text of the proposed rule change, as amended, is available below. Proposed new language is *italicized*; proposed deletions are in [brackets].

* * * * *

Listed Company Manual

* * * * *

103.00 [Non-U.S. Companies] *Foreign Private Issuers*

The Exchange welcomes listing inquiries from [non-U.S. companies] *foreign private issuers*. [It continues to broaden its scope of trading in shares of internationally respected companies based in other countries. With the rapid growth and need for capital of multinational companies and the interdependence of the world's economies, the Exchange is prepared to be the global marketplace.]

Foreign private issuers [Non-U.S. companies] may elect to qualify for listing either under the Alternate Listing Standards for *foreign private issuers* [non-U.S. companies] or the Exchange's domestic listing criteria. [An applicant company] *The foreign private issuer* must meet all of the criteria within the standards under which it seeks to qualify for listing. *For purposes of this Listed Company Manual, the terms ''foreign private issuer'' and ''non-U.S. company'' have the same meaning and are defined in accordance with the SEC's definition of foreign private issuer set out in Rule 3b–4(c) of the Securities Exchange Act of 1934.*

The Alternate Listing Standards are designed to encourage major non-U.S. companies to list their shares on the Exchange. Domestic listing requirements call for minimum distribution of a company's shares within the United States, or in the case of North American companies, within North America. This is a major obstacle for many large non-U.S. companies which otherwise fulfill many times over the normal size and earnings requirements for listing on the Exchange. The principal Alternate Listing Standards focus on worldwide rather than U.S. or North American distribution of a non-U.S. company's shares.

In addition to the minimum numerical standards for listing, the Exchange has established policies and requirements concerning certain corporate governance practices and the reporting of interim earnings. For example, in many foreign countries, controlling law or common practice compel or permit the non-U.S. company to issue interim earnings reports on a semi-annual, as opposed to quarterly, basis or to have a class or classes of

common stock having more or less than one vote per share.

Other Exchange policies concerning the corporate governance practices required of domestic companies which may not be consistent with the home country laws or practices of non-U.S. companies include those which address the structure and composition of the Board of Directors, shareholder approval, quorum requirements for shareholders' meetings and related continued listing criteria.

[Where it appears to the Exchange that a non-U.S. company's interim earnings reporting or corporate governance practices are not prohibited by the law in the country in which it is domiciled, such practices need not necessarily be barriers to listing or continued listing. In addition, the Exchange will permit non-U.S. issuers to follow home-country practices regarding the distribution of annual reports to shareholders, if, at a minimum, (a) shareholders are provided at least summary annual reports, including summary financial information, (b) shareholders have the ability, upon request, to receive an annual report that complies with the requirements of Para. 203.01 (a ''full annual report''), and (c) the financial information contained in the summary annual report is reconciled to U.S. generally-accepted accounting principles to the extent that such reconciliation would be required in the full annual report.

A non-U.S. issuer that seeks to use a summary annual report in lieu of a full annual report should contact its Exchange representative to determine whether the proposed use of the summary annual report would meet these requirements.]

To assist the Exchange in considering the question of the listing or continued listing of the securities of a non-U.S. company whose interim earnings reporting or corporate governance practices are not in compliance with Exchange requirements for domestic companies, the non-U.S. company should furnish the Exchange with a written certification from independent counsel in the country of the non-U.S. company's domicile as to whether or not the non-complying practices are prohibited by home country law.

The Alternate Listing Standards for non-U.S. companies apply only where there is a broad, liquid market for the company's shares in its country of origin.

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202.00 Material Information

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202.05 Timely Disclosure of Material News Developments

A listed company is expected to release quickly to the public any news or information which might reasonably be expected to materially affect the market for its securities. This is one of the most important and fundamental purposes of the listing agreement which the company enters into with the Exchange.

A listed company should also act promptly to dispel unfounded rumors which result in unusual market activity or price variations.

The issuer of income deposit securities traded as a unit shall publicize any change in the terms of the unit, such as changes to the terms and conditions of any of the components (including changes with respect to any original issue discount or other significant tax attributes of any component), or to the ratio of the components within the unit. Such publication shall be made as soon as practicable in relation to the effective date of the change, and should otherwise be made in accordance with the procedures specified in [Para.] *Section* 202.06 below. In addition, the issuer must provide information regarding the terms and conditions of the components of the unit (including information with respect to any original issue discount or other significant tax attributes of any component), and the ratio of the components comprising the unit[,] on its website [or, if it does not maintain a website, in its annual report to unit holders].

* * * * *

203.00 *Reporting Financial Information to Shareholders* [Annual and Interim Reporting Requirements]

203.01 Annual *Financial Statement* [Report] Requirement

Any company with voting or non-voting common securities listed on the Exchange that is required to file with the SEC an annual report that includes audited financial statements (including on Forms 10–K, 20–F, 40–F or N–CSR) is required to simultaneously make such annual report available to shareholders of such securities on or through the company's website.

Companies must also post to their website a prominent undertaking in the English language to provide all holders (including preferred stockholders and bondholders) the ability, upon request, to receive a hard copy of the company's complete audited financial statements free of charge. In addition, simultaneously with this posting, the company must issue a press release stating that its annual report has been filed with the SEC. This press release must also indicate that shareholders have the ability to receive a hard copy of the company's complete audited financial statements free of charge upon request. Companies must provide such hard copies within a reasonable period of time following the request. Moreover, the press release must be published pursuant to the Exchange's press release policy (see Section 202.06 above).

A company that fails to file its annual report on Forms 10–K, 20–F, 40–F or N–CSR with the SEC in a timely manner is subject to the procedures in Section 802.01E.

[The Exchange requires that companies publish at least once a year and distribute to shareholders an annual report containing financial statements of the company and its consolidated subsidiaries prepared in conformity with generally accepted accounting principles. The company must distribute its annual report to its shareholders not later than 120 days (225 days for Non-U.S. issuers) after the close of each fiscal year. Notwithstanding the foregoing, domestic issuers must make this distribution at least fifteen days in advance of the annual meeting. (Non-U.S. issuers are encouraged to do so when possible.) When the annual report is distributed to shareholders, two copies should be sent to the Exchange together with advice as to the date of distribution to shareholders.

The company must distribute its annual report to its shareholders not later than 120 days (225 days for Non-U.S. issuers) after the close of each fiscal year. Notwithstanding the foregoing, domestic issuers must make this distribution at least fifteen days in advance of the annual meeting. (Non-U.S. issuers are encouraged to do so when possible.) When the annual report is distributed to shareholders, two copies should be sent to the Exchange together with advice as to the date of delivery to shareholders.

Companies may satisfy the annual distribution requirement either by distributing an annual report to shareholders, or by distributing to shareholders the Form 10–K (or Form 20–F for Non-U.S. issuers) filed with the SEC, with an indication that it is distributed in lieu of a separate annual report. When the annual report (or Form 10–K or Form 20–F) is distributed to shareholders, two copies should be sent to the Exchange, together with advice as to the date of delivery to shareholders. Distribution shall be in such format and by such means as permitted or required by applicable law and regulation (including any interpretations thereof by

the SEC). (See, for example, the following interpretations by the SEC: Release No. 34–36345; File No. S7–31–95; Release No. 34–37182, File No. S7–13–96; and Release No. 34–42728, File No. S7–11–00.)

A company that is unable to timely file its Form 10–K or Form 20–F with the SEC must notify the Exchange prior to the SEC filing deadline, explaining the reason for the delay and the anticipated filing date. The Exchange will evaluate the circumstances and the continued listing status of the company, and at a minimum will require the company to issue a press release indicating the delay, the reason for the delay and the anticipated filing date. In making its evaluation, the Exchange will consider whether the company has released or plans to release to the press information regarding its financial results for the fiscal year. Once the company does file its Form 10–K (Form 20–F) with the SEC, it must then distribute to the shareholders an annual report or a Form 10–K (Form 20-F) in lieu thereof no later than 15 days (30 days for a non-U.S. issuer) after the filing.

(A) Method of Publication

The Exchange requires publication of the annual financial statements, as well as their submission to shareholders.

While distribution of the statements to shareholders usually results in their receiving some publicity, to be sure of news coverage, companies should submit the statements, or a news release based thereon, to newspapers of general circulation in large cities and to the national news wire services as described in the ''Immediate Release Policy.'' (See Para. 202.06(A).) In addition, the statements, in the form in which sent to shareholders, should also be sent to the securities statistical services, in whose publications they will remain available for ready public reference.

In the case of a company having only bonds listed on the Exchange, the Exchange expects that the required statements or news releases based thereon be sent to the securities statistical services and requires that copies of the statements be sent to bondholders who request them. It also urges that the statements, or news releases based thereon, be sent to newspapers of general circulation in large cities and to the national news wire services.

(B) Annual Statement to be Independently Audited

The Exchange requires that all financial statements contained in annual reports of the company to its shareholders be audited by independent public accountants who are qualified under the laws of some state or country and are subject to a code of professional ethics of the professional accountancy body in that state or country. The financial statements will be accompanied by a copy of the report issued by the independent public accountants with respect to their examination of such statements.

(C) Form of Financial Statements

The Exchange requires that all financial statements contained in annual reports to shareholders be in the same form as the corresponding statements contained in the company's original listing application or as modified to include the additional disclosure agreed upon by the company and the Exchange. The statements are to be prepared in conformity with generally accepted accounting principles.

(D) General Information in Annual Report

The Exchange recommends that the following information be included in all annual reports:

- Address of principal office.
- Names of directors and officers.
- Identification of directors comprising the Audit Committee and other major committees of the Board of Directors.
- Names and addresses of trustees, transfer agents and registrars.
- Number of employees.
- Number of shareholders.

(E) Occasional Delay in Issuance of Statements

The probability of a delay in the issuance of annual financial statements can ordinarily be foreseen. As soon as it becomes apparent that there may be a delay, the company should advise its Exchange representative of the circumstances and the probable extent of the delay.

If the statements cannot be sent to shareholders at least fifteen days in advance of the annual meeting, it may be necessary for the company to postpone the meeting or to adjourn it without transaction of business to a date which shall be fifteen days after the statements are issued. Whether or not such postponement or adjournment will be necessary can be determined only in the light of the particular circumstances. The matter should be discussed with the Exchange representative as soon as the possibility of the delay becomes apparent.

So far as the 120 day (225 day) time limit stated in the first paragraph of this section Section 203.01 is concerned, the Exchange, while ready to extend such time limit on the basis of necessity, does not feel free to do so on the basis of convenience. For example it cannot consent to a delay in the issuance of the statements just to make possible their simultaneous distribution with the proxy material.

In the event of a delay in issuance of the audited financial statements, unaudited earnings information, if expected to be substantially in agreement with the final audited figures, should be released to the financial press. (See Para. 202.06(C) for details.) If that procedure is not feasible, general newspaper publicity should be given to the audited figures as soon as they become available without awaiting completion of the full, formal annual report.]

* * * * *

203.02 Interim Earnings [Reporting] *Release* Requirement

Any company with voting or non-voting common securities listed on the Exchange that is required to file interim financial statements with the SEC is required to release to the press an interim earnings release as soon as its interim financial statements are available. See Section 202.06 above for the Exchange's press release policy.

While the Exchange does not require that the interim reports be sent to shareholders, as a matter of fairness, listed companies that distribute interim reports to shareholders should distribute such reports to both registered and beneficial shareholders.

[(A) Time of Publication

No specific time limit for publication of interim earnings statements has been set, but it is assumed that such statements will be published as soon as available.

It is expected that, in this respect, each company will conform at least to the pattern established by the majority of companies in its industry and, where the company has a previous record of publication of interim statements, to the pattern established by that previous record.

(B) Method of Publication

The Exchange requires publication of interim statements as news items in the public press. It is not required that the statements be sent to shareholders. As a matter of fairness, corporations which distribute interim reports to shareholders should distribute such reports to both registered and beneficial shareholders.

Whether or not the statements are sent to shareholders, to be sure of adequate coverage the statements should be released to newspapers and to the

national news wire services, as described in the ''Immediate Release Policy.'' (See Para. 202.06(A).) In addition, they should be sent to the securities statistical services.

Two copies of each interim earnings statement, in the form released for publication, should be filed with the Exchange. If the company sends interim statements to its shareholders, two copies should be filed with the Exchange.

(C) Form of Interim Financials

The listing agreement merely requires publication (quarterly or semi-annually, as the case may be), of a statement of earnings; it does not require that such statement be sent to shareholders. Interim earnings statements shall be on the same basis of consolidation as the company's annual financial statements and shall disclose, at a minimum, any substantial items of unusual or non-recurrent nature and either net income before and after federal income taxes or net income and the amount of federal taxes. Additional information, and particularly sales data, will, of course, be useful to shareholders.

Such statements may cover each quarter individually or may cover, cumulatively, the elapsed quarters of the current fiscal year; i.e., the statement for the first quarter covering three months, that for the second quarter covering six months and that for the third quarter covering nine months. Publication, each quarter, of a statement covering the preceding twelve months is not generally acceptable, although such moving-year statement may be included as a supplement to the individual or cumulative quarterly statement.

It is recommended that each interim statement include like figures of the same period of the previous year, to afford a basis for comparison. This device may be particularly useful in a case where there is a seasonal cycle in the business.

(D) Exceptions to Policy

Exceptions have been made to this requirement only in cases where conditions peculiar to the type of company, or to the particular company itself, would make quarterly statements impracticable or misleading, as in the case of companies dependent upon long-term contracts, or companies dependent upon the growth and sale of a crop in an annual cycle, or companies operating under conditions which make publication of quarterly statements virtually impossible.

In a case where the Exchange is convinced that quarterly statements are impracticable, or misleading, it may require an agreement to publish semi-annual statements of earnings, or interim statements reporting certain operating statistics which will strive to indicate the trend of the company's business during the period between annual reports.

While no fourth quarter statement is required, items of unusual or non-recurrent nature occurring in the fourth quarter should be reflected separately in the full year earnings release.]

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[203.03 Distributing Annual and Interim Reports to Beneficial Owners of Stock]

In order to assure that annual and interim reports are distributed to beneficial owners of stock held in street name by Exchange member organizations, Exchange Rules provide that a member organization, when requested by a company and given assurance that it will be reimbursed for all reasonable out-of-pocket and clerical expenses, is required to transmit copies of annual and interim reports to each U.S. resident beneficial owner. This requirement applies to both listed and unlisted companies. The Exchange has approved, as fair and reasonable, certain rates of reimbursement of member organizations for all out-of-pocket and clerical expenses incurred in connection with mailing annual and interim reports. See Para. 402.10 for full details and current rates of reimbursement.]

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204.00 Notice[s] *to and Filings with* [by the Company to] the Exchange

204.00 Notice[s] *to and Filings with* [by the Company to] the Exchange

(A) Prompt Written Notice to the Exchange

Prompt written notice *from the listed company* to the Exchange is required in connection with certain actions or events *as specified in Sections 204.01 through 204.25,* [These notices are essential for the Exchange to exercise its self-regulatory responsibilities under the Securities Exchange Act of 1934, including its function of providing a fair and orderly market for a company's securities. Filings required of the company under the 1934 Act do not satisfy the company's obligation to give prompt written notice to the Exchange.

Prompt written notice is required and is] in addition to notice *required to be* given through the Exchange's telephone alert procedures. (See [Para.] *Section* 202.06(B).)

[While the Exchange does take note of advertisements, circulars, SEC filings and news items appearing in the public press, such material is not acceptable as authoritative advice from the company. As to many matters concerning which notice is required, some action on the part of the Exchange may be necessary and such action can only be taken on the basis of direct, authoritative advice from the company.]

(B) Filings with the Exchange

The Exchange[, as well as the SEC,] requires that listed companies file *hard copies of* certain SEC reports and other materials (such as proxies [and prospectuses]) with the Exchange. Since all [domestic and non-U.S.] listed companies are required to file their periodic and current reports, as well as other materials, through the SEC's Electronic Data Gathering Analysis and Retrieval (EDGAR) system, the Exchange [will access certain SEC documents through that system and, except as provided below,] will not *also* require a listed company to file hard copies of *most* SEC filings with the Exchange. Specifically, the Exchange only requires companies to file:

- *one* hard copy[ies] of materials necessary to support a listing application [(see Paras. 703.00 & 903.00)] *as required by Sections 702.04, 703.00 and 903.00,*
- *six hard copies of* proxy materials *not later than the date on which the material is physically or electronically delivered to shareholders* (see Section 402.00),
- *one hard copy of* any filing[s] made on Form 6–K that *is* [are] not required to be filed through EDGAR *not later than the date on which the Form 6–K is filed with the SEC, and*
- *one hard copy of notice to shareholders with respect to any proposed amendments to the company's charter, as well as a certified copy of the amended charter along with a letter of transmittal indicating the sections amended since the previous filing of amendments or amended documents, promptly following the date that the notice is given or the charter is amended. Similar procedure shall be followed with respect to resolutions of the Board of Directors, or any certificate or other document, having the effect of an amendment to the charter or by-laws.*

* * * * *

[204.03 Amendment of Charter or By-Laws

Four copies of any notice to shareholders with respect to proposed amendments to the company's charter are required to be sent promptly to the Exchange.

When such amendments have become effective, a certified copy is required to be sent promptly to the Exchange.

Similar procedure shall be followed with respect to resolutions of the Board

of Directors, or any certificate or other document, having the effect of an amendment to the charter or by-laws.

If the company so desires, it may file copies of the charter or by-laws as amended. If this is done, it will be helpful if the amended documents are accompanied by a letter of transmittal indicating the sections amended since the previous filing of amendments or amended documents.

204.04 Annual Report

The Exchange requires that two copies of the company's annual report be provided to the Exchange when it is distributed to shareholders. These reports should be accompanied by notice to the Exchange as to the date distributed to shareholders.]

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204.[05]*03* Auditors Changed

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204.[06]*04* Business Purpose Changed

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204.[07]*05* Capital Surplus Charges

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204.[08]*06* Closing of Transfer Books

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204.[09]*07* Collateral Removed or Changed

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[204.10 Communications to Shareholders

The company is required to send two copies to the Exchange of every communication directed to shareholders.

204.11 Control, Change of

The Exchange does not require notice from the company in the event of a change in control but relies instead upon filings made with it pursuant to the Securities Exchange Act of 1934.]

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204.[12]*08* Conversion Rate, Changes

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204.[13]*09* Decrease in Floating Supply of Stock

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204.[14]*10* Directors or Executive Officers Changed

Prompt notice is required to be given to the Exchange of any changes in directors or *executive* officers of the company. (*Please also see Section 303A.12(c) which requires that listed companies file an interim written affirmation relating to changes to the board of directors.*)

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204.[15]*11* Disposition in Assets

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204.[16]12 Dividends and Stock Distributions

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204.[17]*13* Form or Nature of the Listed Securities Changed

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204.[18]*14* Interest Payments

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204.[19]*15* Contingent Interest Payments

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[204.20 Interim Earnings Statements

The Exchange requires that two copies of each interim earnings statement in the form released for publication be filed promptly with the Exchange.]

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204.[21]*16* Legal Proceedings

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204.[22]*17* Meetings of Shareholders

The Exchange is required to be given at least ten days' notice of the fixing of a date for the closing of transfer books in connection with any meeting of shareholders. See [Para. 204.29] *Section 204.21.* The notice should include the record date and the meeting date.

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204.[23]*18* Name Change

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204.[24]*19* Nature of Business Changed

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204.[25]*20* *Increases In* Outstanding Amount Of Securities[, Increases In]

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[204.26 Press Release

Two copies of any press release are required to be sent promptly to the Exchange.

204.27 Prospectus

Seven copies of any prospectus or offering circular required to be used pursuant to the Securities Act of 1933 in connection with the sale of a listed security are required to be filed promptly with the Exchange.

204.28 Proxy Material

Six definitive copies of all proxy material of the company are required to be filed with the Exchange not later than the date on which such material is sent to any security holder.

The Exchange urges that preliminary proxy material be submitted for review as more fully discussed in Section 4.]

204.[29]*21* Record Date

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204.[30]*22* Redemption of Listed Securities

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204.[31]*23* Rights or Privileges of Listed Security Changed

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204.[32]*24* Rights to Subscribe

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204.[33]*25* Treasury Stock Changes

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303A Corporate Governance Standards

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14. Listed companies must have and maintain a publicly accessible website. Commentary: To the extent that a listed company is subject to the requirements of Sections 303A.04, .05, .07(c), .09 or .10, each listed company's website must include a printable version of the applicable charters of its compensation, nominating and audit committees, as well as its corporate governance guidelines and code of business conduct and ethics. In addition, a listed company that is a foreign private issuer is required to include the disclosure required by Section 303A.11 on its website in the English language and such website must be accessible from the United States.

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313.00 Voting Rights

313.00 Voting Rights

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(B) Non-Voting Common Stock

The Exchange's voting rights policy permits the listing of the voting common stock of a company which also has outstanding a non-voting common stock as well as the listing of non-voting common stock. However, certain safeguards must be provided to holders of a listed non-voting common stock:

(1) Any class of non-voting common stock that is listed on the Exchange must meet all original listing standards. The rights of the holders of the non-voting common stock should, except for voting rights, be substantially the same as those of the holders of the company's voting common stock.

(2) [The requirement that listed companies publish at least once a year and submit to shareholders an annual report (Para. 203.01) applies equally to holders of voting common stock and to holders of listed non-voting common stock.

(3) In addition, a] *A*lthough the holders of shares of listed non-voting common stock are not entitled to vote generally on matters submitted for shareholder action, holders of any listed non-voting common stock must receive all communications, including proxy material, sent generally to the holders of the voting securities of the listed company.

* * * * *

401.00 Shareholders' Meetings
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401.04 Interval between End of Fiscal Year and Annual Meeting of Shareholders

There is no Exchange requirement relating to the interval between the end of a company's fiscal year and the date of its annual meeting of shareholders. However, the Exchange believes that the annual meeting should be held within a reasonable interval after the close of the fiscal year so that the information in the annual report is relatively timely.

The standard Listing Agreement requires that the annual report be sent to shareholders not later than 120 days (225 days for non-U.S. issuers) after the close of the company's fiscal year and at least 15 days in advance of the annual meeting.]
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703.00 Subsequent Listing Applications and Debt Securities Applications
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703.09 Stock Option, Stock Purchase and Other Remuneration Plans Listing Process
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[(C) Disclosure of Options, etc. in Annual Report

A listed company's annual report to shareholders should disclose the following information as to its option plans:

- The number of shares of its stock issuable under outstanding options at the beginning of the year.
- Separate totals of changes in the number of shares of its stock under option resulting from issuance, exercise, expiration or cancellation of options.
- The number of shares issuable under outstanding options at the close of the year.
- The number of unoptioned shares available at the beginning and at the close of the year for the granting of options under an option plan.
- Any changes in the exercise price of outstanding options, through cancellation and reissuance or otherwise, except price changes resulting from the normal operation of anti-dilution provisions of the options.]

(C) [(D)] Filing a Listing Application Relative to Stock Option, Stock Purchase or Other Remuneration Plans

It is recommended that an application for listing of unissued shares in connection with a stock option, stock purchase or other remuneration plan be filed as soon as possible after all required corporate and shareholder action has been taken.

(D) [E] Supporting Documents
* * * * *

II. Self-Regulatory Organization's Statement of the Purpose of, and Statutory Basis for, the Proposed Rule Change

In its filing with the Commission, the Exchange included statements concerning the purpose of, and basis for, the proposed rule change and discussed any comments it received on the proposed rule change. The text of these statements may be examined at the places specified in Item IV below. The Exchange has prepared summaries, set forth in sections A, B, and C below, of the most significant aspects of such statements.

A. Self-Regulatory Organization's Statement of the Purpose of, and Statutory Basis for, the Proposed Rule Change

1. Purpose

The Exchange has long recognized the importance of investors receiving adequate financial information regarding listed companies and, in fact, has required for many years that all listed companies distribute an annual report including annual audited financial statements to their shareholders.[5] However, Rule 14a–3[6] of the Act has for many decades made that requirement redundant for most NYSE-listed U.S. companies, since the Commission rule requires companies subject to the proxy rules to distribute annual audited financials to shareholders with or prior to the distribution of the annual meeting proxy statement.[7] The Commission's proxy rules do not apply to foreign private issuers who are exempt as a result of Rule 3a12–3 of the Act.[8]

Today all listed companies, U.S. and foreign, are required to file annual reports containing audited financial statements prepared in accordance with or reconciled to U.S. GAAP (including on Forms 10–K, 20–F, 40–F and N–CSR) with the Commission via the Electronic Data Gathering, Analysis and Retrieval system (EDGAR). Many of these companies also post such annual reports to their corporate Web sites. In SR–NYSE–2001–40,[9] the NYSE specified that U.S. companies were permitted to use Commission-approved methods of electronic delivery to satisfy the annual financial statement delivery requirement.

A recent Neilsen/Net Ratings study[10] shows that 75% of Americans have access to the Internet in their homes, and that those numbers are steadily increasing among all age groups. As a result, the NYSE believes that the vast majority of people in this country that review company financials access them online—either through the company's own Web site, EDGAR, or some other service provider. The Exchange also notes the Commission's statement when proposing changes in its Securities Offering Reform Act filing[11] that, ''[a]t this time, we believe that Internet usage has increased sufficiently to allow us to propose a prospectus delivery model for issuers and their intermediaries that relies on timely access to filed information and documents.''

The Exchange believes that the ability to review a company's financials electronically provides a more timely, efficient and cost effective method for companies to provide and investors to access current financial information. The proposed amendments to the Exchange's rules regarding annual reports reflect that current reality.

For these reasons, the NYSE proposes to amend its rules to provide that companies can satisfy the annual financial statement distribution requirement by making the company's annual report on Form 10–K, 20–F, 40–F or N–CSR available on or by a link through its corporate Web site, with a prominent undertaking in English to deliver a paper copy of the company's complete audited financial statements free of charge to any shareholder who requests it. Listed companies will also be required to issue a press release simultaneously with their Web site posting stating that their annual report has been filed with the Commission. This press release must also indicate that shareholders have the ability to receive a hard copy of the complete audited financial statements free of charge upon request within a reasonable period of time.

The Exchange believes that existing Commission requirements regarding

[5] This requirement is presently contained in Section 203.01 of the Listed Company Manual. It can be traced back to an 1895 recommendation that all listed companies send their shareholders an annual report with an income statement and balance sheet.

[6] 17 CFR 240.14a–3.

[7] The requirement to distribute annual reports in Rule 14a–3 of the Act does not apply to registered investment companies. However, registered investment companies, at least semi-annually, must transmit reports to shareholders under Section 30(e) of the Investment Company Act of 1940 and the rules thereunder.

[8] 17 CFR 240.3a12–3.

[9] *See* Securities Exchange Act Release No. 45838 (April 26, 2002), 67 FR 22144 (May 2, 2002) (SR–NYSE–2001–40).

[10] *See* Three out of Four Americans Have Access to the Internet, Neilsen/NetRatings, March 18, 2004.

[11] *See* Securities Act Release No. 8501 (November 3, 2004), 69 FR 71126 (December 8, 2004).

delivery of proxy statements mean that the proposed rule changes will have minimal effect on domestic companies subject to the proxy rules, but the proposed changes will provide significant efficiencies to listed foreign private issuers exempt from the proxy rules under Rule 3a12–3 of the Act.[12]

The Exchange also proposes to eliminate other elements of current Section 203.01 of the Listed Company Manual, including the requirement that a company inform the NYSE if it is unable to file its annual report with the Commission in a timely manner. Under the current rule, U.S. companies are required to distribute annual reports to shareholders no later than 120 days from the close of the fiscal year (225 for foreign private issuers). In order to police compliance with this distribution requirement, the Exchange currently requires that companies inform us of delays in filing annual reports with the SEC. NYSE then considers the circumstances surrounding the delay in determining whether to allow an extension of time for the distribution of annual reports past the required date. Due to the fact that under the rules as proposed, the Exchange will no longer be requiring the distribution of annual reports, the current language setting out the timeframe by which annual reports must be distributed will no longer be applicable. As a result, the Exchange proposes to eliminate this provision. The Exchange notes that the Commission's proxy rules set forth requirements for U.S. companies on how far in advance of shareholder meetings proxies must be sent to shareholders, as well as requirements that such proxy be preceded or accompanied by annual audited financial information.

The Exchange also proposes to eliminate the requirement that a company notify the NYSE prior to the filing deadline if it will not file its annual report with the Commission on time, as well as the language setting out the date by which a company must distribute its annual report once the late annual report has been filed with the Commission. The Exchange notes that Section 802.01E of the Listed Company Manual now provides a specific process for the requirements applicable to companies that fail to file their required annual reports with the Commission by the required date, including a requirement that a company issue a press release disclosing the status of the filing.[13] Moreover, the Exchange monitors listed companies for timely filing of their Commission reports on an ongoing basis.[14]

The Exchange also proposes to eliminate language from Section 203.01 of the Listed Company Manual that sets out requirements that the annual financial statements be independently audited and prepared in accordance with generally accepted accounting principals in light of the fact that these requirements reflect Commission rules relating to the preparation of financial statements.

In light of the fact that the proposed amendment to Section 203.01 of the Listed Company Manual requires that companies post their annual reports filed with the Commission to their Web site, the Exchange proposes to add a new section to the Listed Company Manual—Section 303A.14—that specifically requires listed companies to have and maintain a Web site. This proposed section also collects into one provision the information required under Section 303A of the Listed Company Manual that listed companies must post to their Web sites, including committee charters, corporate governance guidelines and their code of business conduct and ethics.

Currently, Section 103.00 of the Listed Company Manual specifies that foreign private issuers must distribute U.S. GAAP or U.S. GAAP reconciled financial statements in the form of an annual report, or summary annual report to shareholders. Since many NYSE-listed foreign private issuers are also required by home country law to distribute home country financial statements to shareholders months in advance of the completion of the U.S. GAAP or U.S. GAAP reconciled financials, these companies are required to distribute two annual reports—one to satisfy home country requirements and one to satisfy the NYSE's requirements. On the other hand, some NYSE-listed foreign private issuers are incorporated in countries that have no requirement to distribute financials to stockholders, so the NYSE requirement is the only one mandating a physical distribution of annual financial statements.

The Exchange proposes to amend Section 103.00 of the Listed Company Manual to eliminate the requirement that foreign private issuers distribute to shareholders at least a summary annual report that includes summary financial information reconciled to US generally accepted accounting principals and provide a full annual report to shareholders upon request. Under the proposed changes to Section 203.01 of the Listed Company Manual, foreign private issuers will be required to post their annual report on Form 20–F or 40–F to their Web site and to provide hard copies of the full audited, US GAAP reconciled, financial statements to shareholders upon request within a reasonable period of time. The Exchange also proposes to amend Section 103.00 of the Listed Company Manual to eliminate the requirement that a company that proposes to distribute a summary annual report contact an Exchange representative to determine whether the proposed use of the summary annual report meets the Exchange's requirements. The Exchange believes that since companies will no longer be required to distribute full or summary annual reports, this language is superfluous. NYSE also proposes to eliminate language from the first and sixth paragraphs of Section 103.00 of the Listed Company Manual to the extent that such language does not set forth actual listing requirements as part of our overall effort to remove superfluous language and guidance from the Listed Company Manual.

Incidental conforming and cleanup amendments to the NYSE's requirements relating to annual reports are required to Sections 202.05, 203.03, 204.00 through .33 and 313.00 of the Listed Company Manual. These proposed cleanup changes include renumbering of sections and the elimination of references to annual report obligations throughout the Listed Company Manual, including with respect to procedures relating to the distribution of annual reports. The Exchange also proposes to restructure Sections 203.01 and 203.02 of the Listed Company Manual to present our annual and interim financial statement

[12] The Exchange notes that the Commission's proposed release on internet availability of proxy materials would, if adopted, provide companies an internet posting alternative to the current requirement for physical delivery or electronic delivery only upon the consent of shareholders of such materials. *See* Securities Exchange Act Release No. 52926 (December 8, 2005), 70 FR 74598 (December 15, 2005). If adopted as proposed, the internet posting alternative in the Commission proposed release would not apply to the requirement for every registered investment company to transmit reports to shareholders under Section 30(e) of the Investment Company Act of 1940 and the rules thereunder.

[13] The Exchange has contracted with an outside vendor to provide us with ongoing reports listing those companies that failed to file their annual or quarterly reports with the Commission on the required date. The Exchange receives notification of these late filings on the next business day after the filing due date. Exchange staff confirms via an EDGAR search that the listed filing is actually late and then programs an internal electronic alert that notifies the applicable compliance staff member when the delinquent filing is subsequently made.

[14] *See* Telephone Conversation between Annemarie Tierney, Assistant General Counsel, NYSE, and Raymond Lombardo, Special Counsel, Division of Market Regulation, Commission and Rahman Harrison, Special Counsel, Division of Market Regulation, Commission, on June 20, 2006.

requirements in a more logical and orderly manner.

The Exchange also proposes to amend Section 204.00 of the Listed Company Manual to consolidate and streamline the requirements for companies to provide notice to and file certain documents with the Exchange. In relation to this change, the Exchange proposes to limit the need for companies to provide information that is available via the Commission's Electronic Data Gathering Analysis and Retrieval (EDGAR) system or through electronic media alerts subscribed to by the NYSE. For example, the Exchange proposes to eliminate the requirement that companies provide us with two copies of every communication sent to shareholders and with copies of press releases as the appropriate Exchange staff is automatically notified of EDGAR filings or press release dissemination through electronic alert systems to which the Exchange subscribes. The Exchange also proposes to eliminate certain explanatory language from this section that the Exchange considers to be superfluous as a result of the proposed changes. For example, the Exchange no longer believes that it needs to specify that advertisements, circulars and news items appearing in the public press are acceptable as authoritative advice of the company in light of the clear list of items that must be directly noticed or provided to the Exchange.

The Exchange further proposes to eliminate Section 401.04 of the Listed Company Manual. This section provides guidance regarding the interval between end of fiscal year and annual meeting of shareholders. While the Exchange is not disavowing that best practice would be to hold the annual meeting of shareholders at a reasonable interval after the close of the fiscal year, as part of overall efforts to streamline the provisions of the Listed Company Manual, the Exchange has been proposing on an ongoing basis to eliminate sections that provide ''best practice'' guidance, as opposed to requiring specific action. The Exchange ultimately intends that the Listed Company Manual will include only those specific rules that listed companies must satisfy in order to list and remain listed.

The Exchange further proposes a cleanup of Section 703.09 of the Listed Company Manual regarding disclosure of options, stock purchase and other remuneration plans. Due to the fact that the Form 10–K requirements for comprehensive disclosure on options available under equity compensation plans pursuant to Item 201(d) of Regulation S–K and on options issued as executive compensation pursuant to Item 402 of Regulation S–K subsume the Exchange's disclosure requirements, the Exchange no longer deems it necessary to itself recommend specific disclosure of these items, particularly in light of the proposed elimination of the Exchange's requirement that listed companies distribute an annual report to shareholders.

2. Statutory Basis

The Exchange believes that its proposed rule change, as amended, is consistent with Section 6(b) of the Act [15] in general, and furthers the objectives of Section 6(b)(5) of the Act [16] in particular, in that it is designed to prevent fraudulent and manipulative acts and practices, to promote just and equitable principles of trade, to remove impediments to, and perfect the mechanism of a free and open market and, in general, to protect investors and the public interest.

B. Self-Regulatory Organization's Statement on Burden on Competition

The Exchange does not believe that the proposed rule change, as amended, would impose any burden on competition that is not necessary or appropriate in furtherance of the purposes of the Act.

C. Self-Regulatory Organization's Statement on Comments on the Proposed Rule Change Received From Members, Participants, or Others

The Exchange has neither solicited nor received written comments on the proposed rule change, as amended.

III. Date of Effectiveness of the Proposed Rule Change and Timing for Commission Action

Within 35 days of the date of publication of this notice in the **Federal Register** or within such longer period (i) as the Commission may designate up to 90 days of such date if it finds such longer period to be appropriate and publishes its reasons for so finding, or (ii) as to which the NYSE consents, the Commission will:

A. By order approve such proposed rule change; or

B. Institute proceedings to determine whether the proposed rule change should be disapproved.

IV. Solicitation of Comments

Interested persons are invited to submit written data, views, and arguments concerning the foregoing, including whether the proposed rule change is consistent with the Act. Comments may be submitted by any of the following methods:

Electronic Comments

- Use the Commission's Internet comment form (*http://www.sec.gov/rules/sro.shtml*); or
- Send an e-mail to *rule-comments@sec.gov*. Please include File Number SR–NYSE–2005–68 on the subject line.

Paper Comments

- Send paper comments in triplicate to Nancy M. Morris, Secretary, Securities and Exchange Commission, Station Place, 100 F Street, NE., Washington, DC 20549–1090.

All submissions should refer to File Number SR–NYSE–2005–68. This file number should be included on the subject line if e-mail is used. To help the Commission process and review your comments more efficiently, please use only one method. The Commission will post all comments on the Commission's Internet Web site (*http://www.sec.gov/rules/sro.shtml*). Copies of the submission, all subsequent amendments, all written statements with respect to the proposed rule change that are filed with the Commission, and all written communications relating to the proposed rule change between the Commission and any person, other than those that may be withheld from the public in accordance with the provisions of 5 U.S.C. 552, will be available for inspection and copying in the Commission's Public Reference Room. Copies of such filing also will be available for inspection and copying at the principal office of the Exchange. All comments received will be posted without change; the Commission does not edit personal identifying information from submissions. You should submit only information that you wish to make publicly available. All submissions should refer to File Number SR–NYSE–2005–68 and should be submitted on or before July 20, 2006.

For the Commission, by the Division of Market Regulation, pursuant to delegated authority.[17]

Nancy M. Morris,

Secretary.

[FR Doc. E6–10243 Filed 6–28–06; 8:45 am]

BILLING CODE 8010–01–P

[15] 15 U.S.C. 78f(b).

[16] 15 U.S.C. 78f(b)(5).

[17] 17 CFR 200.30–3(a)(12).

SECURITIES AND EXCHANGE COMMISSION

[Release No. 34–54036; File No. SR–Phlx–2005–61]

Self-Regulatory Organizations; Philadelphia Stock Exchange, Inc.; Order Granting Approval of Proposed Rule Change, and Amendment Nos. 1 and 2 Thereto, Relating to the Deletion of Certain Exchange Rules

June 23, 2006.

I. Introduction

On October 14, 2005, the Philadelphia Stock Exchange, Inc. (''Phlx'' or ''Exchange'') filed with the Securities and Exchange Commission (''Commission''), pursuant to section 19(b)(1) of the Securities Exchange Act of 1934 (''Act'') [1] and Rule 19b–4 thereunder,[2] a proposed rule change to eliminate certain rules that the Exchange believes are obsolete due to changes in the law or the business methods employed by the Exchange. On March 10 and May 1, 2006, respectively, the Exchange submitted Amendment Nos. 1 [3] and 2 [4] to the proposed rule change. The proposed rule change, as amended, was published for comment in the **Federal Register** on May 18, 2006.[5] No comments were received regarding the proposal, as amended. This order approves the proposed rule change, as amended.

II. Description of the Proposed Rule Change

Phlx is proposing to remove from its rule book Phlx Rules 129, 241–248, and 923.

Phlx Rule 129: Withdrawal of Orders

Phlx rule 129 prohibits the withdrawal of an order from the Exchange, at the request of another member, for the purpose of the purchase or sale of the securities outside of the Exchange.

Phlx Rules 241–248: Rules for Special Offerings

Phlx Rules 241–248 concern special offerings of securities on the Exchange. In 1942, the Commission amended Rule 10b–2 under the Act to permit an exemption for special offerings under a plan filed with the Commission by an exchange.[6] Phlx's Plan, contained in Phlx rules 241–248, permits special offerings, at a fixed price and for a fixed period of time, on the Exchange where the quantity of stock involved cannot be absorbed in the regular auction market within a reasonable time and at a reasonable price. Phlx rules 241–248 permit a person making a special offering to pay a special commission to a broker for a purchasing customer.

Generally, Phlx Rules 241–248 specify a minimum share size of 1,000 shares, with a value of $25,000. According to the Exchange, by today's standards, 1,000 shares of stock with a value of $25,000 is not a quantity of stock that cannot readily be absorbed in the regular auction market. Phlx Rules 241–248 predate Phlx crossing Rule 126, which has special cross provisions for Trust Shares of 25,000 shares or greater and all securities of 5,000 shares or greater, and PACE, which is described in Phlx Rule 229 and which sets minimum automatic execution sizes for securities on the system of 599 shares, noting that specialists may set higher levels.

In proposing the rescission of Rule 10b–2, the Commission indicated that it believed that the significant changes that have taken place in the securities markets since Rule 10b–2's adoption, and the coverage of other anti-fraud and anti-manipulation provisions of the Federal securities laws, made it appropriate to rescind Rule 10b–2.[7] The Exchange now proposes to delete Phlx Rules 241–248, the plan adopted in response to Rule 10b–2, because it believes that these rules are obsolete as the Commission rescinded Rule 10b–2 and the Exchange has not utilized Phlx Rules 241–248 in the past twenty years.[8]

Phlx Rule 923: Member Officers

Phlx Rule 923 requires members associated with member corporations to be officers and voting stockholders of those member corporations, noting that the Exchange may waive the voting stock requirement of the rule.

III. Discussion

After careful consideration, the Commission finds that the proposed rule change, as amended, is consistent with the requirements of the Act and the rules and regulations thereunder applicable to a national securities exchange. Specifically, the Commission finds that the proposal is consistent with section 6(b)(5) of the Act,[9] which requires, in part, that the rules of an exchange be designed to promote just and equitable principles of trade, to remove impediments to and perfect the mechanism of a free and open market and a national market system, and, in general, to protect investors and the public interest.[10]

As noted above, the Exchange proposes to clarify the Exchange's rules by eliminating provisions that no longer are necessary and are obsolete. The Commission believes these changes are consistent with the Act. With respect to the deletion of Phlx Rule 129, the Exchange notes that currently members, in exercising their duty to obtain best execution for orders entrusted to them, may remove orders from the Exchange and seek execution in other venues. With respect to the proposed deletion of Phlx Rules 241–248, the Commission notes that these rules are substantially similar to former NYSE Rule 391, which was rescinded in 1993.[11] In approving the NYSE's deletion of this rule, the Commission noted that it was appropriate for the Exchange rescind NYSE Rule 391 in light of the rescission of Rule 10b–2.

Moreover, the Commission believes that it is consistent with the Act for Phlx to delete Phlx Rule 923, to provide member corporations additional flexibility to choose whom in their company to employ as members of the Exchange. According to the Exchange, this rule was adopted as least fifty years ago, when most member corporations were small regional companies. The purpose of this rule at that time, according to the Exchange, may have been to provide an additional means of obtaining security for the debts of the member corporation by requiring that the members who were trading the securities also be officers and/or owners of the corporation. Today, Phlx has other rule-based means to require adequate financial security for the debts

[1] 15 U.S.C. 78s(b)(1).

[2] 17 CFR 240.19b–4.

[3] Amendment No. 1, which replaced the original filing in its entirety, made clarifying changes to the proposed rule change and sought to retain Phlx Rules 229 Supplementary Material .07(c)(ii) and 236.

[4] Amendment No. 2, which replaced the original filing and Amendment No. 1 in their entirety, made general clarifying changes to the proposed rule change and sought to retain Phlx rule 219, as well as Phlx rules 229 Supplementary Material .07(c)(ii) and 236. Phlx states that it plans to propose to delete Phlx Rules 219, 229 Supplementary Material .07(c)ii), and 236 in a future proposed rule change regarding a change to Phlx systems.

[5] *See* Securities Exchange Act Release No. 53795 (May 12, 2006), 71 FR 28893 (May 18, 2006) (''Notice'').

[6] Phlx filed its plan in 1943. *See* Securities Exchange Act Release No. 3487 (September 23, 1943).

[7] *See* Securities Exchange Act Release No. 32100 (April 2, 1993), 58 FR 18145 (April 8, 1993).

[8] *See also* Securities Exchange Act Release No. 32822 (August 31, 1993), 58 FR 47484 (September 9, 1993) (SR–NYSE–93–20) (rescinding New York Stock Exchange (''NYSE'') Rule 391, which is similar to Phlx Rules 241–248).

[9] 15 U.S.C. 78f(b)(5).

[10] In approving this proposal, the Commission has considered the proposed rule's impact of efficiency, competition, and capital formation. 15 U.S.C. 78c(f).

[11] *See* Securities Exchange Act Release No. 32822, *supra* note 8.

of member corporations and for ensuring that member corporations are generally financially solvent.[12]

IV. Conclusion

It is therefore ordered, pursuant to section 19(b)(2) of the Act,[13] that the proposed rule change (SR–Phlx–2005–61), as amended, is approved.

For the Commission, by the Division of Market Regulation, pursuant to delegated authority.[14]

Nancy M. Morris,

Secretary.

[FR Doc. 06–5792 Filed 6–28–06; 8:45 am]

BILLING CODE 8010–01–M

SMALL BUSINESS ADMINISTRATION

[Disaster Declaration #10505 and #10506]

Iowa Disaster #IA–00004

AGENCY: U.S. Small Business Administration.

ACTION: Notice.

SUMMARY: This is a notice of an Administrative declaration of a disaster for the State of Iowa dated 06/22/2006.

Incident: Severe Storms and Tornadoes.

Incident Period: 04/13/2006 through 04/14/2006.

Effective Date: 06/22/2006.

Physical Loan Application Deadline Date: 08/21/2006.

Economic Injury (EIDL) Loan Application Deadline Date: 03/22/2007.

ADDRESSES: Submit completed loan applications to: U.S. Small Business Administration, National Processing and Disbursement Center, 14925 Kingsport Road, Fort Worth, TX 76155.

FOR FURTHER INFORMATION CONTACT: A. Escobar, Office of Disaster Assistance, U.S. Small Business Administration, 409 3rd Street, SW., Suite 6050, Washington, DC 20416.

SUPPLEMENTARY INFORMATION: Notice is hereby given that as a result of the Administrator's disaster declaration applications for disaster loans may be filed at the address listed above or other locally announced locations.

The following areas have been determined to be adversely affected by the disaster:

Primary Counties:

Johnson.

Contiguous Counties: Iowa:

Benton, Cedar, Iowa, Linn, Louisa, Muscatine, Washington.

The Interest Rates are:

	Percent
Homeowners With Credit Available Elsewhere	5.750
Homeowners Without Credit Available Elsewhere	2.875
Businesses With Credit Available Elsewhere	7.408
Businesses & Small Agricultural Cooperatives Without Credit Available Elsewhere	4.000
Other (Including Non-Profit Organizations) With Credit Available Elsewhere	5.000
Businesses and Non-Profit Organizations Without Credit Available Elsewhere	4.000

The number assigned to this disaster for physical damage is 10505 C and for economic injury is 10506 0.

The State which received an EIDL Declaration # is Iowa.

(Catalog of Federal Domestic Assistance Numbers 59002 and 59008)

Hector V. Barreto,

Administrator.

[FR Doc. E6–10227 Filed 6–28–06; 8:45 am]

BILLING CODE 8025–01–P

SMALL BUSINESS ADMINISTRATION

National Advisory Council; Notice of Cancellation for Public Meeting

The U.S. Small Business Administration (SBA), National Advisory Council public meeting originally scheduled for Friday, June 30, 2006, will be cancelled until further notice. The Web site will be updated with information on the new date, time and location. The Web site is *http://www.sba.gov/nac/index.hml.*

If you have any questions, please contact Balbina Caldwell, Director of the National Advisory Council, SBA Headquarters, 409 3rd Street, SW., Washington, DC 20416, phone (202) 205–6914, e-mail: *Balbina.Caldwell@sba.gov.*

Matthew K. Becker,

Committee Management Officer.

[FR Doc. E6–10229 Filed 6–28–06; 8:45 am]

BILLING CODE 8025–01–P

DEPARTMENT OF TRANSPORTATION

Federal Transit Administration

Federal Highway Administration

[Docket Number: FTA–2006–24905]

Notice of Availability of Proposed Guidance on Section 6002 of the Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users (SAFETEA–LU) and Request for Comments

AGENCIES: Federal Transit Administration (FTA), Federal Highway Administration (FHWA), DOT.

ACTION: Notice of availability; request for comments.

SUMMARY: This notice announces the availability of proposed guidance on the application of section 6002 of the Safe, Accountable, Flexible, and Efficient Transportation Equity Act: A Legacy for Users (SAFETEA–LU) (Pub. L. 109–59, 119 Stat. 1144) to projects funded by the Federal Transit Administration (FTA), the Federal Highway Administration (FHWA), or both. Section 6002 of SAFETEA–LU adds requirements and refinements to the environmental review process for highway and public transportation capital projects. The proposed guidance describes how FTA and FHWA propose to implement the new requirements within the environmental review process required by the National Environmental Policy Act (NEPA) and other Federal laws. The FTA and FHWA request public comments on this proposed guidance.

DATES: Comments must be received by July 31, 2006. Late filed comments will be considered to the extent practicable.

ADDRESSES: The proposed guidance is available on the FTA Web site at *http://www.fta.dot.gov/Section6002.doc,* in the DOT docket at *http://dms.dot.gov* in docket number FTA–2006–24905, or in hardcopy by contacting the individuals listed below under **FOR FURTHER INFORMATION CONTACT**.

Comments, which must be identified by the docket number FTA–2006–24905, may be submitted by any of the following methods:

Web site: Link to *http://dms.dot.gov* and follow the instructions for submitting comments on the DOT electronic docket site.

Fax: Telefax comments to (202) 493–2251.

U.S. Mail: Mail comments to Docket Management Facility; U.S. Department of Transportation, 400 Seventh Street, SW., PL–401, Washington, DC 20590.

Hand Delivery: Deliver to Room PL–401 on the plaza level of the Nassif

[12] *See e.g.*, Phlx Rule 909 (requiring member organizations to provide and maintain security for any claims owed to the Exchange and other members and member organizations); and Phlx Rule 924 (making the member organization liable for the fees, fines, dues, penalties and other amounts imposed by the Exchange on its members; this provision applies regardless of the officer or ownership status of the member). According to Phlx, member corporations are a subset of member organizations. Therefore, Phlx Rules 909 and 924 apply to member corporations.

[13] 15 U.S.C. 78s(b)(2).

[14] 17 CFR 200.30–3(a)(12).

Building at 400 Seventh Street, SW., Washington, DC 20590, between 9 a.m. and 5 p.m. e.t., Monday through Friday, except Federal holidays.

For access to the docket to view a complete copy of the proposed guidance, or to read any comments received, go to *http://dms.dot.gov* at any time or to Room PL–401 on the plaza level of the Nassif Building, 400 Seventh Street, SW., Washington, DC, between 9 a.m. and 5 p.m. e.t., Monday through Friday, except Federal holidays.

Instructions: You must include the agency name (Federal Transit Administration) and the docket number (FTA–2006–24905) with the comments. You should submit two copies of your comments if you submit them by mail. If you wish to receive confirmation that the docket received your comments, you must include a self-addressed stamped postcard. All comments received will be posted without change to the Department's Docket Management System (DMS) Web site located at *http://dms.dot.gov,* so that any interested party can view the comments of others. As a result, any personal identifying information included in your comments will be publicly available to any user of DMS. Anyone is able to search the electronic form of all comments received into any of our dockets by the name of the individual submitting the comment (or signing the comment, if submitted on behalf of an association, business, labor union, etc.). You may view DOT's complete Privacy Act Statement in the **Federal Register** published on April 11, 2000 (Volume 65, Number 70, pages 19477–78) or you may visit *http://dms.dot.gov.*

FOR FURTHER INFORMATION CONTACT: For FTA: Joseph Ossi, Office of Planning and Environment (TPE), (202) 366–1613, or Christopher Van Wyk, Office of Chief Counsel (TCC), (202) 366–1733, Federal Transit Administration, U.S. Department of Transportation, 400 Seventh Street, SW., Washington, DC 20590.

For FHWA: Pamela Stephenson, Office of Project Development (HEPE), (202) 366–2062, or Janet Myers, Office of Chief Counsel (HCC), (202) 366–2019, Federal Highway Administration, U.S. Department of Transportation, 400 Seventh Street SW., Washington, DC 20590.

SUPPLEMENTARY INFORMATION:

Electronic Access

An electronic copy of this notice may be downloaded using a computer, modem and suitable communications software from the Government Printing Office's Electronic Bulletin Board Service at (202) 512–1661. Internet users may reach the Office of the Federal Register's home page at *http://www.archives.gov* and the Government Printing Office's Web site at *http://www.access.gpo.gov.* An electronic version of the proposed guidance may be downloaded by accessing the DOT DMS docket, as described above, at *http://dms.dot.gov.*

Background

The FTA and FHWA are proposing the issuance of joint guidance on the environmental review process required by section 6002 of SAFETEA–LU (Section 6002), which has been codified at 23 U.S.C. 139. Section 6002 adds requirements and refinements to the process by which FHWA and FTA comply with NEPA, which process is set forth in the regulations of the Council on Environmental Quality (CEQ), 40 CFR parts 1500 through 1508, and in the FHWA–FTA environmental impact regulation, 23 CFR part 771. Section 6002 addresses the roles of the project sponsor and the lead, participating, and cooperating agencies; sets new requirements for coordinating and scheduling agency reviews; broadens the authority of States to use Federal aid to ensure timely environmental reviews; specifies a process for resolving interagency disagreements; and establishes a statute of limitations on claims against transportation projects.

The purpose of this proposed guidance is to provide explanations of new and changed aspects of the environmental review process for FHWA and FTA. The guidance would inform transportation practitioners and others about what and how things need to be done differently as a result of SAFETEA–LU. Although this proposed guidance outlines new requirements affecting the environmental review process, it does not supersede any regulations promulgated under NEPA or any other Federal environmental statute. In particular, this proposed guidance would supplement the previously mentioned CEQ regulations (40 CFR parts 1500–1508) and FHWA–FTA environmental impact regulation (23 CFR part 771) which remain in effect. The intent of this proposed guidance is to provide project sponsors with as much flexibility as possible in administering the environmental review process, while providing a framework to facilitate efficient project management and decision-making in accordance with the law.

Section 3032 of SAFETEA–LU requires that FTA provide an opportunity for public review and comment on any guidance issued by FTA that imposes new binding obligations or that effects a significant change in policy, before it becomes effective. The FTA has determined that section 3032 applies to this joint FHWA–FTA guidance on section 6002. The purpose of this notice and the comment period that follows is to comply with section 3032. Section 3032 requirements do not apply to FHWA, but FHWA is nevertheless joining FTA in the publication of this notice and request for comment.

The FTA and FHWA request comment on the proposed guidance in general, which is available as described above under **ADDRESSES**. The FTA also specifically seeks comment on two issues:

1. *Schedules for FTA Projects.* Should FTA require the development of a schedule for all FTA projects requiring an environmental impact statement (EIS)? Section 6002 makes the inclusion of a project schedule in the ''coordination plan'' for the project optional, but FHWA already requires the development of a project schedule for EISs. Under Section 6002, the schedule, when developed, becomes part of the mandatory coordination plan for the EIS. The FTA is considering whether to require, in the interest of good project management, the development of a project schedule and its inclusion in the coordination plan for any transit project requiring an EIS.

2. *New Starts Alternatives Analysis.* Should FTA continue to allow a New Starts Alternatives Analysis, as defined in 49 U.S.C. 5309(a)(1), to be developed as a non-Federal planning document not subject to NEPA regulatory requirements, or should FTA require that New Starts Alternatives Analysis be merged into the NEPA document (normally an EIS for New Starts projects), be subject to NEPA regulatory requirements, and be signed by the FTA Regional Administrator? Until 1993, all New Starts projects requiring EISs were developed using the latter approach, i.e., the combined Alternatives Analysis/Draft EIS. The planning regulations issued in 1993, at 23 CFR part 450, provided the option of a planning study, called a Major Investment Study (MIS), to serve as the required New Starts Alternatives Analysis. Notwithstanding statutory changes to the MIS requirement in 1998, FTA continued to allow the still-required New Starts Alternatives Analysis to be either a planning study or a NEPA document. Some have suggested that a change may again be in order as a result of two specific SAFETEA–LU provisions: (a) The definition of the New Starts Alternatives

Analysis in Section 3011 of SAFETEA–LU, codified at 49 U.S.C. 5309(a)(1), aligns it more closely with the MPO planning process; and (b) section 6002 requires that the ''type of work'' be identified by the project sponsor at the initiation of the environmental review process. The FTA seeks comment on any implications of these provisions for the New Starts Alternatives Analysis and the NEPA review of the New Starts project.

The FHWA specifically seeks comment on the following questions and issues:

1. *Flexibility.* Are there specific areas where the guidance could and should provide greater flexibility, while still complying with the relevant section 6002 requirement? Within the limits of section 6002, would flexibility in a particular area allow for customization by the State departments of transportation, transit agencies, and FHWA and FTA field offices in response to issues of greater regional concern?

2. *Adequacy of guidance.* Are there areas that need additional guidance or instruction on how best to implement the new requirement?

3. *Lead agency responsibilities.* Some responsibilities of the lead agency have been retained by FHWA and FTA, some have been essentially assigned to the State or local lead agency, and some have been left for the Federal and non-Federal lead agencies to allocate between themselves, project by project as they see fit. Does the description of the roles of the various lead agencies adequately communicate their respective responsibilities, authorities, and limitations? Is the division of labor, responsibility, and authority appropriate?

4. *Methodologies for project analyses.* Is the process for involving participating agencies in the development of methodologies adequate? Will it serve to minimize late-in-the-process methodological debates between transportation agencies and resource agencies?

5. *Coordination with participating agencies.* Does the proposed guidance present the required coordination with participating agencies, including the development of a schedule and its resulting implications, in sufficient detail? Should changes in the schedule require coordination with all participating agencies or just with the cooperating agencies, as stated in SAFETEA–LU?

The FTA and FHWA will respond to comments on the guidance generated by this Notice in a second **Federal Register** notice to be published after the close of the comment period. That second notice will also announce the availability of the revised Section 6002 guidance that reflects the changes implemented as a result of comments received. In the meantime, the proposed guidance provides the current FHWA and FTA interpretation of Section 6002, the requirements of which became effective on August 10, 2005, the date of SAFETEA–LU's enactment.

Authority: 23 U.S.C. 315; Pub. L. 109–59, 119 Stat. 1144; 49 U.S.C. 5334; 23 U.S.C. 139; 49 CFR 1.48; 49 CFR 1.51.

Issued on: June 23, 2006.

Sandra K. Bushue,

Deputy Administrator, Federal Transit Administration.

J. Richard Capka,

Administrator, Federal Highway Administration.

[FR Doc. E6–10217 Filed 6–28–06; 8:45 am]

BILLING CODE 4910–57–P

DEPARTMENT OF TRANSPORTATION

Federal Railroad Administration

Environmental Impact Statement: Relocation or Reconstruction of Rail Lines in Tupelo, MS

AGENCY: Federal Railroad Administration (FRA), Department of Transportation (DOT).

ACTION: Notice of intent to prepare an Environmental Impact Statement.

SUMMARY: The Federal Railroad Administration (FRA) is issuing this notice to advise the public that FRA will prepare an Environmental Impact Statement (EIS) for the relocation or reconstruction of railroad lines in the Tupelo, Mississippi central business district. The study area is defined to extend from the vicinity of Plantersville, MS, southeast of Tupelo, to the vicinity of Sherman, northwest of Tupelo. Tupelo is the primary business center of northeast Mississippi.

Currently, within the central business district there are more than 25 at-grade rail crossings on two railroad lines. One of the rail lines is owned by the BNSF Railway Company (BNSF) and the other by the Kansas City Southern Railroad (KCS). The two rail lines cross at an interchange near downtown Tupelo. There are between twenty and twenty-five trains per day on the BNSF line, and three or four per day on the KCS line. There are few rail customers remaining in the central business district, and most of the trains are through trains operating in the Birmingham, Alabama to Memphis, Tennessee corridor.

Traffic congestion is already a significant problem in the central business district, and the current rail line configuration is a contributing cause to this congestion. The switchyard between the two lines is within the central business district, and the BNSF line runs diagonally through the highest volume intersection in the city. Tupelo's employment has been growing at a steady pace of about 1,000 jobs per year for the last few years, which only increases vehicular traffic to the area and further exacerbates the situation. Moreover, issues with access to emergency facilities exist in that many Tupelo residents may be cut off from the regional medical center due to delays caused by the rail line and switching station.

The FRA has entered into a cooperative agreement with the Mississippi Department of Transportation (MDOT), with FRA as the lead Federal agency and MDOT as the lead state agency. Funding for the EIS was provided through an appropriation in the Transportation, Treasury, and Independent Agencies Appropriations Act, 2004, Public Law 108–199 (January 23, 2004).

FOR FURTHER INFORMATION CONTACT: Mr. Wayne Parrish, Planning Division, Mississippi Department of Transportation, 401 N. West Street, Jackson, MS 39201, telephone number (601) 359–7685; Mr. John Winkle, Project Manager, Federal Railroad Administration, 1120 Vermont Avenue, NW., Washington, DC 20590, telephone number (202) 493–6067.

Environmental Issues: Possible environmental impacts include displacement of commercial and residential properties, increased noise in some areas, effects to historical properties or archaeological sites, impacts to parks and recreational resources, viewshed effects, impacts to water resources, wetlands, and sensitive biological species and habitat, land use compatibility impacts, energy use, and impacts to agricultural lands.

Alternatives: The EIS will consider alternatives that include: (1) Taking no action; (2) reconstruction with grade separation of rail and highway facilities within the existing corridors; and (3) relocation and construction of the railroad line(s) in new location(s).

Scoping and Comment: FRA encourages broad participation in the EIS process and review of the resulting environmental documents. Comments, questions, and suggestions related to the project and potential environmental concerns are invited from all interested agencies and the public at large to

ensure that the full range of issues related to the proposed action and all reasonable alternatives are addressed and all significant issues are identified. These comments, questions, and suggestions should be addressed to the MDOT or the FRA at the addresses provided above. The public is invited to participate in the scoping process, to review the Draft EIS when published, and to provide input at all public meetings. Letters describing the proposed scope of the EIS and soliciting comments will be sent to appropriate Federal, State, and local agencies, elected officials, community organizations, and to private organizations and citizens who express interest in this proposal. Several public meetings to be advertised in the local media will be held in the project area regarding this proposal. Release of the Draft EIS for public comment and public meetings and hearings related to that document will be announced as those dates are established. A scoping meeting will be conducted in the Tupelo area at a date and place, which will be widely publicized well in advance of the meeting.

Persons interested in providing comments on the scope of the EIS should do so within 30 days of the publication of this Notice of Intent. Comments can be sent in writing to the points of contact listed above.

Issued in Washington, DC, on June 23, 2006.

Mark E. Yachmetz,

Associate Administrator for Railroad Development, Federal Railroad Administration.

[FR Doc. 06–5822 Filed 6–28–06; 8:45 am]

BILLING CODE 4910–06–P

DEPARTMENT OF TRANSPORTATION

National Highway Traffic Safety Administration

[Docket No. NHTSA–2006–24964]

Highway Safety Programs; Model Specifications for Devices To Measure Breath Alcohol

AGENCY: National Highway Traffic Safety Administration, DOT.

ACTION: Notice.

SUMMARY: This notice amends the Conforming Products List published in 2004 (69 FR 42237) for instruments that conform to the Model Specifications for Evidential Breath Testing Devices (58 FR 48705).

DATES: *Effective Date:* June 29, 2006.

FOR FURTHER INFORMATION CONTACT: Dr. Maria E. Vegega, Office of Behavioral Safety Research, Behavioral Research Division (NTI–131), National Highway Traffic Safety Administration, 400 Seventh Street, SW., Washington, DC 20590; Telephone: (202) 366–4892.

SUPPLEMENTARY INFORMATION: On November 5, 1973, the National Highway Traffic Safety Administration (NHTSA) published the Standards for Devices to Measure Breath Alcohol (38 FR 30459). A Qualified Products List of Evidential Breath Measurement Devices comprised of instruments that met this standard was first issued on November 21, 1974 (39 FR 41399).

On December 14, 1984 (49 FR 48854), NHTSA converted this standard to Model Specifications for Evidential Breath Testing Devices (Model Specifications), and published a Conforming Products List (CPL) of instruments that were found to conform to the Model Specifications as Appendix D to that notice (49 FR 48864).

On September 17, 1993, NHTSA published a notice (58 FR 48705) to amend the Model Specifications. The notice changed the alcohol concentration levels at which instruments are evaluated, from 0.000, 0.050, 0.101, and 0.151 BAC, to 0.000, 0.020, 0.040, 0.080, and 0.160 BAC; added a test for the presence of acetone; and expanded the definition of alcohol to include other low molecular weight alcohols including methyl or isopropyl. On July 14, 2004, the most recent amendment to the Conforming Products List (CPL) was published (69 FR 42237), identifying those instruments found to conform with the Model Specifications.

Since the last publication of the CPL, five (5) instruments have been evaluated and found to meet the Model Specifications, as amended on September 17, 1993, for mobile and non-mobile use. In alphabetical order by company, they are:

(1) The ''Alcotest 6810'' manufactured by Draeger Safety, Inc., Durango, Colorado. This is a hand held device intended for use in stationary or roadside operation and is powered by an internal battery. It uses a fuel cell sensor.

(2) & (3) The ''Alcotector BAC–100'' and the ''Alcotector C2H5OH'', both sold by Guth Laboratories, Inc. of Harrisburg, Pennsylvania. These devices are hand held devices intended for use in stationary or roadside operations. Both devices use fuel cell sensors and are powered by 4 ''AA'' batteries. The two devices are identical except for their printers. The BAC–100 has an internal printer. The C2H5OH does not have an internal printer, but can use an optional wireless printer.

(4) The ''EV 30'' manufactured by Lifeloc Technologies, Inc. of Wheat Ridge, Colorado. This device is a hand held device that uses a fuel cell sensor and is powered by an internal battery. It is intended for stationary or roadside operations.

(5) The ''DataMaster DMT'', manufactured by National Patent Analytical Systems, Inc. of Mansfield, Ohio. This is a bench-top, AC powered, infrared type breath tester with an analytical filter at 3.44 microns, and interference filters at 3.37 and 3.50 microns.

The CPL has been amended to add the five instruments identified above.

In accordance with the foregoing, the CPL is therefore amended, as set forth below.

CONFORMING PRODUCTS LIST OF EVIDENTIAL BREATH MEASUREMENT DEVICES

Manufacturer and Model	Mobile	Nonmobile
Alcohol Countermeasure Systems Corp. Mississauga, Ontario, Canada:		
Alert J3AD*	X	X
Alert J4X.ec	X	X
PBA3000C	X	X
BAC Systems, Inc., Ontario, Canada:		
Breath Analysis Computer*	X	X
CAMEC Ltd., North Shields, Tyne and Ware, England:		

CONFORMING PRODUCTS LIST OF EVIDENTIAL BREATH MEASUREMENT DEVICES—Continued

Manufacturer and Model	Mobile	Nonmobile
IR Breath Analyzer*	X	X
CMI, Inc., Owensboro, Kentucky:		
Intoxilyzer Model:		
200	X	X
200D	X	X
300	X	X
400	X	X
400PA	X	X
1400	X	X
4011*	X	X
4011A*	X	X
4011AS*	X	X
4011AS–A*	X	X
4011AS–AQ*	X	X
4011 AW*	X	X
4011A27–10100*	X	X
4011A27–10100 with filter*	X	X
5000	X	X
5000 (w/Cal. Vapor Re-Circ.)	X	X
5000 (w/3/8″ ID Hose option)	X	X
5000CD	X	X
5000CD/FG5	X	X
5000EN	X	X
5000 (CAL DOJ)	X	X
5000VA	X	X
8000	X	X
PAC 1200*	X	X
S–D2	X	X
S–D5	X	X
Draeger Safety, Inc., Durango, Colorado:		
Alcotest Model:		
6510	X	X
6810	X	X
7010*	X	X
7110*	X	X
7110 MKIII	X	X
7110 MKIII–C	X	X
7410	X	X
7410 Plus	X	X
Breathalyzer Model:		
900*	X	X
900A*	X	X
900BG*	X	X
7410	X	X
7410–II	X	X
Gall's Inc., Lexington, Kentucky:		
Alcohol Detection System—A.D.S. 500	X	X
Guth Laboratories, Inc., Harrisburg, Pennsylvania:		
Alcotector BAC–100	X	X
Alcotector C2H5OH	X	X
IntoXimeters, Inc., St. Louis, Missouri:		
Photo Electric Intoximeter*	.....	X
GC IntoXimeter MK II*	X	X
GC IntoXimeter MK IV*	X	X
Auto IntoXimeter*	X	X
IntoXimeter Model:		
3000*	X	X
3000 (rev B1)*	X	X
3000 (rev B2)*	X	X
3000 (rev B2A)*	X	X
3000 (rev B2A) w/FM option*	X	X
3000 (Fuel Cell)*	X	X
3000 D*	X	X
3000 DFC*	X	X
Alcomonitor	.....	X
Alcomonitor CC	X	X
Alco-Sensor III	X	X
Alco-Sensor III (Enhanced with Serial Numbers above 1,200,000)	X	X
Alco-Sensor IV	X	X
Alco-Sensor IV–XL	X	X
Alco-Sensor AZ	X	X
Alco-Sensor FST	X	X

CONFORMING PRODUCTS LIST OF EVIDENTIAL BREATH MEASUREMENT DEVICES—Continued

Manufacturer and Model	Mobile	Nonmobile
RBT–AZ	X	X
RBT III	X	X
RBT III–A	X	X
RBT IV	X	X
RBT IV with CEM (cell enhancement module)	X	X
IntoX EC/IR	X	X
IntoX EC/IR II	X	X
Portable IntoX EC/IR	X	X
Komyo Kitagawa, Kogyo, K.K., Japan:		
Alcolyzer DPA–2*	X	X
Breath Alcohol Meter PAM 101B*	X	X
Lifeloc Technologies, Inc., (formerly Lifeloc, Inc.), Wheat Ridge, Colorado:		
PBA 3000B	X	X
PBA 3000–P*	X	X
PBA 3000C	X	X
Alcohol Data Sensor	X	X
Phoenix	X	X
EV 30	X	X
FC 10	X	X
FC 20	X	X
Lion Laboratories, Ltd., Cardiff, Wales, United Kingdom:		
Alcolmeter Model:		
300	X	X
400	X	X
SD–2*	X	X
EBA*	X	X
Intoxilyzer Model:		
200	X	X
200D	X	X
1400	X	X
5000 CD/FG5	X	X
5000 EN	X	X
Luckey Laboratories, San Bernadino, California:		
Alco-Analyzer Model:		
1000*	.....	X
2000*	.....	X
National Draeger, Inc., Durango, Colorado:		
Alcotest Model:		
7010*	X	X
7110*	X	X
7110 MKIII	X	X
7110 MKIII–C	X	X
7410	X	X
7410 Plus	X	X
Breathalyzer Model:		
900*	X	X
900A*	X	X
900BG*	X	X
7410	X	X
7410–II	X	X
National Patent Analytical Systems, Inc., Mansfield, Ohio:		
BAC DataMaster (with or without the Delta-1 accessory)	X	X
BAC Verifier Datamaster (with or without the Delta-1 accessory)	X	X
DataMaster cdm (with or without the Delta-1 accessory)	X	X
DataMaster DMT	X	X
Omicron Systems, Palo Alto, California:		
Intoxilyzer Model:		
4011*	X	X
4011AW*	X	X
Plus 4 Engineering, Minturn, Colorado:		
5000 Plus4*	X	X
Seres, Paris, France:		
Alco Master	X	X
Alcopro	X	X
Siemans-Allis, Cherry Hill, New Jersey:		
Alcomat*	X	X
Alcomat F*	X	X
Smith and Wesson Electronics, Springfield, Massachusetts:		
Breathalyzer Model:		
900*	X	X
900A*	X	X
1000*	X	X

CONFORMING PRODUCTS LIST OF EVIDENTIAL BREATH MEASUREMENT DEVICES—Continued

Manufacturer and Model	Mobile	Nonmobile
2000*	X	X
2000 (non-Humidity Sensor)*	X	X
Sound-Off, Inc., Hudsonville, Michigan:		
AlcoData	X	X
Seres Alco Master	X	X
Seres Alcopro	X	X
Stephenson Corp.:		
Breathalyzer 900*	X	X
U.S. Alcohol Testing, Inc./Protection Devices, Inc., Rancho Cucamonga, California:		
Alco-Analyzer 1000	.....	X
Alco-Analyzer 2000	.....	X
Alco-Analyzer 2100	X	X
Verax Systems, Inc., Fairport, New York:		
BAC Verifier*	X	X
BAC Verifier Datamaster	X	X
BAC Verifier Datamaster II*	X	X

* Instruments marked with an asterisk (*) meet the Model Specifications detailed in 49 FR 48854 (December 14, 1984) (i.e., instruments tested at 0.000, 0.050, 0.101, and 0.151 BAC.) Instruments not marked with an asterisk meet the Model Specifications detailed in 58 FR 48705 (September 17, 1993), and were tested at BACs = 0.000, 0.020, 0.040, 0.080, and 0.160. All instruments that meet the Model Specifications currently in effect (dated September 17, 1993) also meet the Model Specifications for Screening Devices to Measure Alcohol in Bodily Fluids.

(23 U.S.C. 402; delegations of authority at 49 CFR 1.50 and 501.1)

Issued on: June 22, 2006.

Marilena Amoni,

Associate Administrator for Research and Program Development.

[FR Doc. E6–10258 Filed 6–28–06; 8:45 am]

BILLING CODE 4910–59–P

DEPARTMENT OF TRANSPORTATION

Surface Transportation Board

[STB Docket Nos. AB–33 (Sub–No. 242X) and STB Docket No. AB–471 (Sub–No. 7X)]

Union Pacific Railroad Company—Abandonment Exemption—in Montgomery County, KS and South Kansas & Oklahoma Railroad, Inc.—Discontinuance of Service Exemption—in Montgomery County, KS

Union Pacific Railroad Company (UP) and South Kansas & Oklahoma Railroad, Inc. (SKO) (collectively, applicants), have jointly filed a notice of exemption under 49 CFR 1152 Subpart F—*Exempt Abandonments and Discontinuances of Service* for UP to abandon, and for SKO to discontinue service over, approximately 0.8 miles of railroad located: (1) Between milepost 166.0, at the west bank of the Verdigris River, and milepost 166.6, at the west edge of Sunflower Road; and (2) at the portion of UP's railroad easement between milepost 166.6, at the west edge of Sunflower Road, and milepost 166.8, at the west edge of Linden Street, near Coffeyville, in Montgomery County, KS.[1] The line traverses United States Postal Service Zip Code 67337.

Applicants have certified that: (1) No local traffic has moved over the line for at least 2 years; (2) no overhead traffic has moved over the line for at least 2 years;[2] (3) no formal complaint filed by a user of rail service on the line (or by a state or local government entity acting on behalf of such user) regarding cessation of service over the line either is pending with the Surface Transportation Board (Board) or with any U.S. District Court or has been decided in favor of complainant within the 2-year period; and (4) the requirements at 49 CFR 1105.7 (environmental reports), 49 CFR 1105.8 (historic reports), 49 CFR 1105.11 (transmittal letter), 49 CFR 1105.12 (newspaper publication), and 49 CFR 1152.50(d)(1) (notice to governmental agencies) have been met.

As a condition to this exemption, any employee adversely affected by the abandonment shall be protected under *Oregon Short Line R. Co.—Abandonment—Goshen,* 360 I.C.C. 91 (1979). To address whether this condition adequately protects affected employees, a petition for partial revocation under 49 U.S.C. 10502(d) must be filed.

Provided no formal expression of intent to file an offer of financial assistance (OFA) has been received, this exemption will be effective on July 29, 2006, unless stayed pending reconsideration. Petitions to stay that do not involve environmental issues,[3] formal expressions of intent to file an OFA under 49 CFR 1152.27(c)(2),[4] and trail use/rail banking requests under 49 CFR 1152.29 must be filed by July 10, 2006. Petitions to reopen or requests for public use conditions under 49 CFR 1152.28 must be filed by July 19, 2006, with the Surface Transportation Board, 1925 K Street, NW., Washington, DC 20423–0001.

A copy of any petition filed with the Board should be sent to applicants' representatives: For UP, Mack H. Shumate, Jr., Senior General Attorney, Union Pacific Railroad Company, 101 North Wacker Drive, Suite 1920, Chicago, IL 60606; for SKO, Thomas F. McFarland, Thomas F. McFarland, P.C., 208 South LaSalle Street, Suite 1890, Chicago, IL 60604.

[1] Applicants state that the portion of the rail line over which UP has a railroad easement is located within the premises of Coffeyville Resources Refinery & Marketing, LLC (Refinery Company), and that Refinery Company owns the right-of-way and track materials within that portion of the rail line. Applicants also state that, by lease effective December 10, 1990, UP leased the line and adjacent trackage to Southeast Kansas Railway Company, which subsequently was merged into SKO. According to applicants, UP intends to make private non-rail use of the land east of the refinery.

[2] It appears that the line is stub-ended and thus that there can be no overhead traffic to be rerouted.

[3] The Board will grant a stay if an informed decision on environmental issues (whether raised by a party or by the Board's Section of Environmental Analysis (SEA) in its independent investigation) cannot be made before the exemption's effective date. *See Exemption of Out-of-Service Rail Lines,* 5 I.C.C.2d 377 (1989). Any request for a stay should be filed as soon as possible so that the Board may take appropriate action before the exemption's effective date.

[4] Each OFA must be accompanied by the filing fee, which increased to $1,300, effective April 19, 2006. *See Regulations Governing Fees For Services Performed in Connection with Licensing and Related Services—2006 Update,* STB Ex Parte No. 542 (Sub–No. 13) (STB served Mar. 20, 2006).

If the verified notice contains false or misleading information, the exemption is void *ab initio*.

Applicants have filed an environmental and historic report which addresses the effects, if any, of the abandonment and discontinuance on the environment and historic resources. SEA will issue an environmental assessment (EA) by July 3, 2006. Interested persons may obtain a copy of the EA by writing to SEA (Room 500, Surface Transportation Board, Washington, DC 20423) or by calling SEA, at (202) 565–1539. [Assistance for the hearing impaired is available through the Federal Information Relay Service (FIRS) at 1–800–877–8339.] Comments on environmental and historic preservation matters must be filed within 15 days after the EA becomes available to the public.

Environmental, historic preservation, public use, or trail use/rail banking conditions will be imposed, where appropriate, in a subsequent decision.

Pursuant to the provisions of 49 CFR 1152.29(e)(2), UP shall file a notice of consummation with the Board to signify that it has exercised the authority granted and fully abandoned the line. If consummation has not been effected by UP's filing of a notice of consummation by June 29, 2007, and there are no legal or regulatory barriers to consummation, the authority to abandon will automatically expire.

Board decisions and notices are available on our Web site at *HTTP://WWW.STB.DOT.GOV*.

Decided: June 26, 2006.

By the Board, David M. Konschnik, Director, Office of Proceedings.

Vernon A. Williams,

Secretary.

[FR Doc. 06–5821 Filed 6–28–06; 8:45 am]

BILLING CODE 4915–01–P

DEPARTMENT OF THE TREASURY

Submission for OMB Review; Comment Request

June 23, 2006.

The Department of the Treasury has submitted the following public information collection requirement(s) to OMB for review and clearance under the Paperwork Reduction Act of 1995, Public Law 104–13. Copies of the submission(s) may be obtained by calling the Treasury Bureau Clearance Officer listed. Comments regarding this information collection should be addressed to the OMB reviewer listed and to the Treasury Department Clearance Officer, Department of the Treasury, Room 11000, 1750 Pennsylvania Avenue, NW., Washington, DC 20220.

DATES: Written comments should be received on or before July 31, 2006 to be assured of consideration.

Financial Crimes Enforcement Network (FinCEN)

OMB Number: 1506–0014.

Type of Review: Extension.

Title: Report of International Transportation of Currency or Monetary Instruments.

Form: FinCEN 105.

Description: FinCEN, and the Department of Homeland Security (DHS) and the DHS Bureaus, are required under 31 U.S.C. 5316(a) to collect information regarding the mailing, shipment, or transportation of currency or monetary instruments of more than $10,000 in value into or out of the United States.

Respondents: Business or other for-profit; not for-profit institutions and individuals or households.

Estimated Total Reporting Burden: 140,000 hours.

Clearance Officer: Russell Stephenson, (202) 354–6012, Department of the Treasury, Financial Crimes Enforcement Network, P.O. Box 39, Vienna, VA 22183.

OMB Reviewer: Alexander T. Hunt, (202) 395–7316, Office of Management and Budget, Room 10235, New Executive Office Building, Washington, DC 20503.

Michael A. Robinson,

Treasury PRA Clearance Officer.

[FR Doc. 06–5807 Filed 6–28–06; 8:45 am]

BILLING CODE 4810–02–P

DEPARTMENT OF THE TREASURY

Submission for OMB Review; Comment Request

June 21, 2006.

The Department of the Treasury has submitted the following public information collection requirement(s) to OMB for review and clearance under the Paperwork Reduction Act of 1995, Public Law 104–13. Copies of the submission(s) may be obtained by calling the Treasury Bureau Clearance Officer listed. Comments regarding this information collection should be addressed to the OMB reviewer listed and to the Treasury Department Clearance Officer, Department of the Treasury, Room 11000, 1750 Pennsylvania Avenue, NW., Washington, DC 20220.

Dates: Written comments should be received on or before July 31, 2006 to be assured of consideration.

Internal Revenue Service (IRS)

OMB Number: 1545–0195.

Type of Review: Extension.

Title: Election to Postpone Determination as to Whether the Presumption Applies That an Activity Is Engaged in for Profit.

Form: Form 5213.

Description: The form is used by individuals, partnerships, estates trusts, and S corporations to make an election to postpone an IRS determination as to whether an activity is engaged in for profit for 5 years (7 years for breeding, training, or showing racing horses). The data is used to verify eligibility to make an election.

Respondents: Business or other for-profit and individuals or households.

Estimated Total Burden Hours: 2,762 hours.

Clearance Officer: Glenn P. Kirkland, (202) 622–3428, Internal Revenue Service, Room 6516, 1111 Constitution Avenue, NW., Washington, DC 20224.

OMB Reviewer: Alexander T. Hunt, (202) 395–7316, Office of Management and Budget, Room 10235, New Executive Office Building, Washington, DC 20503.

Robert Dahl,

Treasury PRA Clearance Officer.

[FR Doc. 06–5808 Filed 6–28–06; 8:45 am]

BILLING CODE 4830–01–P

DEPARTMENT OF THE TREASURY

Internal Revenue Service

Proposed Collection; Comment Request for Form 3468

AGENCY: Internal Revenue Service (IRS), Treasury

ACTION: Notice and request for comments.

SUMMARY: The Department of the Treasury, as part of its continuing effort to reduce paperwork and respondent burden, invites the general public and other Federal agencies to take this opportunity to comment on proposed and/or continuing information collections, as required by the Paperwork Reduction Act of 1995, Public Law 104–13 (44 U.S.C. 3506(c)(2)(A)). Currently, the IRS is soliciting comments concerning Form 3468, Investment Credit.

DATES: Written comments should be received on or before August 28, 2006, to be assured of consideration.

ADDRESSES: Direct all written comments to Glenn P. Kirkland, Internal Revenue Service, room 6516, 1111 Constitution Avenue, NW., Washington, DC 20224.

FOR FURTHER INFORMATION CONTACT: Requests for additional information or copies of the form and instructions should be directed to R. Joseph Durbala, (202) 622–3634, Internal Revenue Service, room 6516, 1111 Constitution Avenue, NW., Washington, DC 20224, or through the internet at *RJoseph.Durbala@irs.gov.*

SUPPLEMENTARY INFORMATION:

Title: Investment Credit.

OMB Number: 1545–0155.

Form Number: 3468.

Abstract: Taxpayers are allowed a credit against their income taxes for certain expenses they incur for their trades or businesses. Form 3468 is used to compute this investment tax credit. The information collected is used by the IRS to verify that the credit has been correctly computed.

Current Actions: There are no changes being made to the form at this time. This submission is for renewal purposes only.

Type of Review: Extension of a currently approved collection.

Affected Public: Business or other for-profit organizations, individuals or households, farms, and not-for-profit institutions.

Estimated Number of Respondents: 14,898.

Estimated Time per Response: 20 hours, 41 minutes.

Estimated Total Annual Burden Hours: 308,091.

The following paragraph applies to all of the collections of information covered by this notice:

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the collection of information displays a valid OMB control number. Books or records relating to a collection of information must be retained as long as their contents may become material in the administration of any internal revenue law. Generally, tax returns and tax return information are confidential, as required by 26 U.S.C. 6103.

Request for Comments: Comments submitted in response to this notice will be summarized and/or included in the request for OMB approval. All comments will become a matter of public record. Comments are invited on: (a) Whether the collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology; and (e) estimates of capital or start-up costs and costs of operation, maintenance, and purchase of services to provide information.

Approved: June 22, 2006.

Glenn P. Kirkland,

IRS Reports Clearance Officer.

[FR Doc. E6–10254 Filed 6–28–06; 8:45 am]

BILLING CODE 4830–01–P

DEPARTMENT OF THE TREASURY

Internal Revenue Service

Proposed Collection; Comment Request for Form 5884

AGENCY: Internal Revenue Service (IRS), Treasury.

ACTION: Notice and request for comments.

SUMMARY: The Department of the Treasury, as part of its continuing effort to reduce paperwork and respondent burden, invites the general public and other Federal agencies to take this opportunity to comment on proposed and/or continuing information collections, as required by the Paperwork Reduction Act of 1995, Public Law 104–13 (44 U.S.C. 3506(c)(2)(A)). Currently, the IRS is soliciting comments concerning Form 5884, Work Opportunity Credit.

DATES: Written comments should be received on or before August 28, 2006, to be assured of consideration.

ADDRESSES: Direct all written comments to Glenn Kirkland, Internal Revenue Service, room 6516, 1111 Constitution Avenue, NW., Washington, DC 20224.

FOR FURTHER INFORMATION CONTACT: Requests for additional information or copies of the form and instructions should be directed to R. Joseph Durbala, (202) 622–3634, Internal Revenue Service, room 6516, 1111 Constitution Avenue, NW., Washington, DC 20224 or through the internet at *RJoseph.Durbala@irs.gov.*

SUPPLEMENTARY INFORMATION:

Title: Work Opportunity Credit

OMB Number: 1545–0219.

Form Number: 5884.

Abstract: Internal Revenue Code section 38(b)(2) allows a credit against income tax to employers hiring individuals from certain targeted groups such as welfare recipients, etc. The employer uses Form 5884 to compute this credit. The IRS uses the information on the form to verify that the correct amount of credit was claimed.

Current Actions: Changes are being made to this form to support the redesign of Form 3800, General Business Credit.

Type of Review: Revision of a currently approved collection.

Affected Public: Individuals or households, business or other for-profit organizations and farms.

Estimated Number of Responses: 11,677.

Estimated Time per Respondent: 4 hours, 30 minutes.

Estimated Total Annual Burden Hours: 52,547.

The following paragraph applies to all of the collections of information covered by this notice:

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the collection of information displays a valid OMB control number. Books or records relating to a collection of information must be retained as long as their contents may become material in the administration of any internal revenue law. Generally, tax returns and tax return information are confidential, as required by 26 U.S.C. 6103.

Request for Comments: Comments submitted in response to this notice will be summarized and/or included in the request for OMB approval. All comments will become a matter of public record. Comments are invited on: (a) Whether the collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology; and (e) estimates of capital or start-up costs and costs of operation, maintenance, and purchase of services to provide information.

Approved: June 22, 2006

Glenn P. Kirkland,

IRS Reports Clearance Officer.

[FR Doc. E6–10257 Filed 6–28–06; 8:45 am]

BILLING CODE 4830–01–P

DEPARTMENT OF THE TREASURY

Internal Revenue Service

Proposed Collection; Comment Request for Form 8752

AGENCY: Internal Revenue Service (IRS), Treasury.

ACTION: Notice and request for comments.

SUMMARY: The Department of the Treasury, as part of its continuing effort to reduce paperwork and respondent burden, invites the general public and other Federal agencies to take this opportunity to comment on proposed and/or continuing information collections, as required by the Paperwork Reduction Act of 1995, Public Law 104–13 (44 U.S.C. 3506(c)(2)(A)). Currently, the IRS is soliciting comments concerning Form 8752, Required Payment or Refund Under Section 7519.

DATES: Written comments should be received on or before August 28, 2006 to be assured of consideration.

ADDRESSES: Direct all written comments to Glenn P. Kirkland, Internal Revenue Service, room 6516, 1111 Constitution Avenue, NW., Washington, DC 20224.

FOR FURTHER INFORMATION CONTACT: Requests for additional information or copies of the form and instructions this regulation should be directed to R. Joseph Durbala at (202) 622–3634, Internal Revenue Service, room 6516, 1111 Constitution Avenue, NW., Washington, DC 20224, or through the Internet at *RJoseph.Durbala@irs.gov*.

SUPPLEMENTARY INFORMATION:

Title: Required Payment or Refund Under Section 7519.

OMB Number: 1545–1181.

Form Number: 8752.

Abstract: Partnerships and S corporations use Form 8752 to compute and report the payment required under Internal Revenue Code section 7519 or to obtain a refund of net prior year payments. Such payments are required of any partnership or S corporation that has elected under Code section 444 to have a tax year other than a required tax year.

Current Actions: There is no change being made to the form at this time.

Type of Review: Extension of a currently approved collection.

Affected Public: Business or other for-profit organizations and farms.

Estimated Number of Respondents: 72,000.

Estimated Time per Respondent: 7 hr., 52 min.

Estimated Total Annual Burden Hours: 565,920.

The following paragraph applies to all of the collections of information covered by this notice:

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the collection of information displays a valid OMB control number. Books or records relating to a collection of information must be retained as long as their contents may become material in the administration of any internal revenue law. Generally, tax returns and tax return information are confidential, as required by 26 U.S.C. 6103.

Request for Comments: Comments submitted in response to this notice will be summarized and/or included in the request for OMB approval. All comments will become a matter of public record. Comments are invited on: (a) Whether the collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology; and (e) estimates of capital or start-up costs and costs of operation, maintenance, and purchase of services to provide information.

Approved: June 22, 2006.

Glenn P. Kirkland,

IRS Reports Clearance Officer.

[FR Doc. E6–10259 Filed 6–28–06; 8:45 am]

BILLING CODE 4830–01–P

DEPARTMENT OF THE TREASURY

Internal Revenue Service

Proposed Collection; Comment Request for PS–79–93 (TD 8633)

AGENCY: Internal Revenue Service (IRS), Treasury.

ACTION: Notice and request for comments.

SUMMARY: The Department of the Treasury, as part of its continuing effort to reduce paperwork and respondent burden, invites the general public and other Federal agencies to take this opportunity to comment on proposed and/or continuing information collections, as required by the Paperwork Reduction Act of 1995, Public Law 104–13 (44 U.S.C. 3506(c)(2)(A)). Currently, the IRS is soliciting comments concerning PS–79–93 (TD 8633), Grantor Trust Reporting Requirements (§ 1.674–4).

DATES: Written comments should be received on or before August 28, 2006, to be assured of consideration.

ADDRESSES: Direct all written comments to Glenn P. Kirkland, Internal Revenue Service, room 6516, 1111 Constitution Avenue, NW., Washington, DC 20224.

FOR FURTHER INFORMATION CONTACT: Requests for additional information or copies of the form and instructions should be directed to R. Joseph Durbala, (202) 622–3634, at Internal Revenue Service, room 6516, 1111 Constitution Avenue, NW., Washington, DC 20224, or through the internet at *RJoseph.Durbala@irs.gov*.

SUPPLEMENTARY INFORMATION:

Title: Grantor Trust Reporting Requirements.

OMB Number: 1545–1442.

Form Number: PS–79–93.

Abstract: The information required by these regulations is used by the Internal Revenue Service to ensure that items of income, deduction, and credit of a trust as owned by a grantor or another person are properly reported.

Current Actions: There is no change in the paperwork burden previously approved by OMB. This form is being submitted for renewal purposes only.

Type of Review: Extension of a currently approved collection.

Affected Public: Individuals or households, and Businesses and other for-profit organizations.

Estimated Number of Respondents: 1,840,000.

Estimated Time per Respondent: 30 minutes.

Estimated Total Annual Burden Hours: 920,000.

The following paragraph applies to all of the collections of information covered by this notice:

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the collection of information displays a valid OMB control number. Books or records relating to a collection of information must be retained as long as their contents may become material in the administration of any internal revenue law. Generally, tax returns and tax return information are confidential, as required by 26 U.S.C. 6103.

Request for Comments: Comments submitted in response to this notice will be summarized and/or included in the request for OMB approval. All comments will become a matter of public record. Comments are invited on: (a) Whether the collection of information is necessary for the proper

performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology; and (e) estimates of capital or start-up costs and costs of operation, maintenance, and purchase of services to provide information.

Approved: June 21, 2006.

Glenn P. Kirkland,

IRS Reports Clearance Officer.

[FR Doc. E6–10260 Filed 6–28–06; 8:45 am]

BILLING CODE 4830–01–P

DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900–0673]

Agency Information Collection Activities Under OMB Review

AGENCY: Veterans Benefits Administration, Department of Veterans Affairs.

ACTION: Notice.

SUMMARY: In compliance with the Paperwork Reduction Act (PRA) of 1995 (44 U.S.C. 3501–21), this notice announces that the Veterans Benefits Administration (VBA), Department of Veterans Affairs, has submitted the collection of information abstracted below to the Office of Management and Budget (OMB) for review and comment. The PRA submission describes the nature of the information collection and its expected cost and burden; it includes the actual data collection instrument.

DATES: Comments must be submitted on or before July 31, 2006.

FOR FURTHER INFORMATION CONTACT: Denise McLamb, Records Management Service (005G2), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420, (202) 565–8374, fax (202) 565–6950 or e-mail *denise.mclamb@mail.va.gov*. Please refer to ''OMB Control No. 2900–0673.'' Send comments and recommendations concerning any aspect of the information collection to VA's OMB Desk Officer, OMB Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503 (202) 395–7316. Please refer to ''OMB Control No. 2900–0673'' in any correspondence.

SUPPLEMENTARY INFORMATION:

Title: Request for One-VA Identification Card, VA Form 0711.

OMB Control Number: 2900–0673.

Type of Review: Extension of a currently approved collection.

Abstract: VA Form 0711 is used to collect pertinent information from employees, applicants seeking employment with VA, contractors, and affiliates (such as students, WOC employees and others) prior to issuing a Department identification credential. The data collected will be used to personalize, print, and issue a personal identify verification card.

An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The **Federal Register** Notice with a 60-day comment period soliciting comments on this collection of information was published on February 14, 2006 at pages 7826–7827.

Affected Public: Federal Government, Individuals or households, and Business or other for-profits.

Estimated Annual Burden: 8,333 hours.

Estimated Average Burden per Respondent: 5 minutes.

Frequency of Response: On occasion.

Estimated Number of Respondents: 100,000.

Dated: June 14, 2006.

By direction of the Secretary.

Denise McLamb,

Program Analyst, Records Management Service.

[FR Doc. E6–10233 Filed 6–28–06; 8:45 am]

BILLING CODE 8320–01–P

DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900–New (10–0439)]

Agency Information Collection Activities Under OMB Review

AGENCY: Veterans Health Administration, Department of Veterans Affairs.

ACTION: Notice.

SUMMARY: In compliance with the Paperwork Reduction Act (PRA) of 1995 (44 U.S.C. 3501–3521), this notice announces that the Veterans Health Administration (VHA), Department of Veterans Affairs, has submitted the collection of information abstracted below to the Office of Management and Budget (OMB) for review and comment. The PRA submission describes the nature of the information collection and its expected cost and burden; it includes the actual data collection instrument.

DATES: Comments must be submitted on or before July 31, 2006.

FOR FURTHER INFORMATION OR A COPY OF THE SUBMISSION CONTACT: Denise McLamb, Records Management Service (005G2), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420, (202) 565–8374, fax (202) 565–7045 or e-mail: *denise.mclamb@mail.va.gov*. Please refer to ''OMB Control No. 2900–New (10–0439).''

Send comments and recommendations concerning any aspect of the information collection to VA's OMB Desk Officer, OMB Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503 (202) 395–7316. Please refer to ''OMB Control No. 2900–New (10–0439)'' in any correspondence.

SUPPLEMENTARY INFORMATION:

Title: Learner's Perception (LP) Survey, VA Form 10–0439.

OMB Control Number: 2900–New (10–0439).

Type of Review: New collection.

Abstract: VA Form 10–0439 will be used to obtain health care trainees perception of their clinical experience with VA versus non-VA facilities. VA will use the data to identify strengths and opportunities for improvement in VA clinical training programs.

An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The **Federal Register** Notice with a 60-day comment period soliciting comments on this collection of information was published on April 13, 2006, at page 19239.

Affected Public: Individuals or households.

Estimated Annual Burden: 2,250 hours.

Estimated Average Burden per Respondent: 15 minutes.

Frequency of Response: One-time.

Estimated Number of Respondents: 9,000.

Dated: June 14, 2006.

By direction of the Secretary.

Denise McLamb,

Program Analyst, Records Management Service.

[FR Doc. E6–10235 Filed 6–28–06; 8:45 am]

BILLING CODE 8320–01–P

DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900–0427]

Proposed Information Collection Activity: Proposed Collection; Comment Request

AGENCY: Veterans Health Administration, Department of Veterans Affairs.

ACTION: Notice.

SUMMARY: The Veterans Health Administration (VHA) is announcing an opportunity for public comment on the proposed collection of certain information by the agency. Under the Paperwork Reduction Act (PRA) of 1995, Federal agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension of a currently approved collection, and allow 60 days for public comment in response to the notice. This notice solicits comments on information needed to determine the healthcare needs of former prisoner of war.

DATES: Written comments and recommendations on the proposed collection of information should be received on or before August 28, 2006.

ADDRESSES: Submit written comments on the collection of information to Ann Bickoff, Veterans Health Administration (193E1), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420 or e-mail *ann.bickoff@mail.va.gov.* Please refer to ''OMB Control No. 2900–0427'' in any correspondence.

FOR FURTHER INFORMATION CONTACT: Ann Bickoff at (202) 273–8310 or fax (202) 273–9381.

SUPPLEMENTARY INFORMATION: Under the PRA of 1995 (Pub. L. 104–13; 44 U.S.C. 3501–3521), Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. This request for comment is being made pursuant to section 3506(c)(2)(A) of the PRA.

With respect to the following collection of information, VHA invites comments on: (1) Whether the proposed collection of information is necessary for the proper performance of VHA's functions, including whether the information will have practical utility; (2) the accuracy of VHA's estimate of the burden of the proposed collection of information; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or the use of other forms of information technology.

Title and Form Number: Former POW Medical History, VA Form 10–0048.

OMB Control Number: 2900–0427.

Type of Review: Extension of a currently approved collection.

Abstract: VA physicians complete VA Form 10–0048 during a claimant's medical examination. The data collected will be used to evaluate the healthcare, disability compensation or rehabilitation needs of former prisoner of war.

Affected Public: Individuals or households.

Estimated Total Annual Burden: 113 hours.

Estimated Average Burden per Respondent: 90 minutes.

Frequency of Response: One-time.

Estimated Number of Respondents: 75.

Dated: June 15, 2006.

By direction of the Secretary.

Denise McLamb,

Program Analyst, Records Management Service.

[FR Doc. E6–10237 Filed 6–28–06; 8:45 am]

BILLING CODE 8320–01–P

DEPARTMENT OF VETERANS AFFAIRS

National Research Advisory Council; Notice of Meeting

The Department of Veterans Affairs (VA) gives notice under Public Law 92–463 (Federal Advisory Committee Act) that the National Research Advisory Council will hold a meeting on Monday, July 31, 2006, at VA's Office of Research and Development, 1722 Eye Street, NW., Washington, DC. The meeting will convene at 8:30 a.m. in Room 900, and conclude by 3 p.m. The meeting is open to the public.

The purpose of the Council is to provide external advice and review for VA's research mission. The agenda will include a review and discussion of the council's annual report for 2006 and a strategic overview of VA research.

Any member of the public wishing to attend the meeting or wishing further information should contact Dr. Jay Freedman, Designated Federal Officer, at (202) 254–0267. Oral comments from the public will not be accepted at the meeting. Written statements or comments should be transmitted electronically to *jay.freedman@va.gov* or mailed to Dr. Freedman at Department of Veterans Affairs, Office of Research and Development (12), 810 Vermont Avenue, NW., Washington, DC 20420.

Dated: June 20, 2006.

By Direction of the Secretary.

E. Philip Riggin,

Committee Management Officer.

[FR Doc. 06–5781 Filed 6–28–05; 8:45 am]

BILLING CODE 8320–01–M

Corrections

Federal Register

Vol. 71, No. 125

Thursday, June 29, 2006

This section of the FEDERAL REGISTER contains editorial corrections of previously published Presidential, Rule, Proposed Rule, and Notice documents. These corrections are prepared by the Office of the Federal Register. Agency prepared corrections are issued as signed documents and appear in the appropriate document categories elsewhere in the issue.

ENVIRONMENTAL PROTECTION AGENCY

40 CFR Part 141

[EPA–HQ–OW–2002–0043; FRL–8012–1]

RIN 2040–AD38

National Primary Drinking Water Regulations: Stage 2 Disinfectants and Disinfection Byproducts Rule

Correction

In rule document 06–3 beginning on page 388 in the issue of Wednesday, January 4, 2006, make the following corrections:

§141.131 [Corrected]

On page 481, in § 141.31(c)(1) the table is corrected to read as set forth below:

Methodology	SM (19th or 20th ed)	SM Online [2]	ASTM method	EPA method	Residual measured [1]			
					Free Cl_2	Combined Cl_2	Total Cl_2	ClO_2
Amperometric Titration	4500–Cl D	4500–Cl D–00	D 1253–86 (96), 03		X	X	X	
Low Level Amperometric Titration.	4500–Cl E	4500–Cl E–00					X	
DPD Ferrous Titrimetric	4500–Cl F	4500–Cl F–00			X	X	X	
DPD Colorimetric	4500–Cl G	4500–Cl G–00			X	X	X	
Syringaldazine (FACTS)	4500–Cl H	4500–Cl H–00			X			
Iodometric Electrode	4500–Cl I	4500–Cl I–00					X	
DPD	4500–ClO_2 D							X
Amperometric Method II	4500–ClO_2 E	4500–ClO_2 E–00						X
Lissamine Green Spectrophotometric.				327.0 Rev 1.1				X

[1] X indicates method is approved for measuring specified disinfectant residual. Free chlorine or total chlorine may be measured for demonstrating compliance with the chlorine MRDL and combined chlorine, or total chlorine may be measured for demonstrating compliance with the chloramine MRDL.

[2] The Standard Methods Online version that is approved is indicated by the last two digits in the method number which is the year of approval by the Standard Method Committee. Standard Methods Online are available at *http://www.standardmethods.org.*

[FR Doc. C6–3 Filed 6–28–06; 8:45 am]

BILLING CODE 1505–01–D

Federal Register

Thursday,
June 29, 2006

Part II

Department of Health and Human Services

Centers for Medicare & Medicaid Services

Medicare Program; Five-Year Review of Work Relative Value Units Under the Physician Fee Schedule and Proposed Changes to the Practice Expense Methodology; Notice

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS–1512–PN]

RIN 0938–AO22

Medicare Program; Five-Year Review of Work Relative Value Units Under the Physician Fee Schedule and Proposed Changes to the Practice Expense Methodology

AGENCY: Centers for Medicare & Medicaid Services (CMS), HHS.

ACTION: Proposed notice.

SUMMARY: This proposed notice sets forth proposed revisions to work relative value units (RVUs) affecting payment for physicians' services. The statute requires that we review RVUs no less often than every 5 years. This is our third review of work RVUs since we implemented the physician fee schedule (PFS) on January 1, 1992. These revisions to work RVUs are proposed to be effective for services furnished beginning January 1, 2007. These revisions reflect changes in medical practice, coding changes, new data on relative value components, and the addition of new procedures that affect the relative amount of physician work required to perform each service as required by the statute. In addition, we are proposing revisions to our methodology for calculating practice expense (PE) RVUs, including changes based on supplemental survey data for PE. This revised methodology would be used to establish payment for services beginning January 1, 2007.

DATES: To be assured consideration, comments must be received at one of the addresses provided below, no later than 5 p.m. on Monday, August 21, 2006.

ADDRESSES: In commenting, please refer to file code CMS–1512–PN. Because of staff and resource limitations, we cannot accept comments by facsimile (FAX) transmission.

You may submit comments in one of four ways (no duplicates, please):

1. *Electronically.* You may submit electronic comments on specific issues in this regulation to *http://www.cms.hhs.gov/eRulemaking.* Click on the link ''Submit electronic comments on CMS regulations with an open comment period.'' (Attachments should be in Microsoft Word, WordPerfect, or Excel; however, we prefer Microsoft Word.)

2. *By regular mail.* You may mail written comments (one original and two copies) to the following address ONLY:

Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS–1512–PN, P.O. Box 8014, Baltimore, MD 21244–8014.

Please allow sufficient time for mailed comments to be received before the close of the comment period.

3. *By express or overnight mail.* You may send written comments (one original and two copies) to the following address ONLY:

Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS–1512–PN, Mail Stop C4–26–05, 7500 Security Boulevard, Baltimore, MD 21244–1850.

4. *By hand or courier.* If you prefer, you may deliver (by hand or courier) your written comments (one original and two copies) before the close of the comment period to one of the following addresses. If you intend to deliver your comments to the Baltimore address, please call telephone number (410) 786–7195 in advance to schedule your arrival with one of our staff members.

Room 445–G, Hubert H. Humphrey Building, 200 Independence Avenue, SW., Washington, DC 20201; or 7500 Security Boulevard, Baltimore, MD 21244–1850.

(Because access to the interior of the HHH Building is not readily available to persons without Federal Government identification, commenters are encouraged to leave their comments in the CMS drop slots located in the main lobby of the building. A stamp-in clock is available for persons wishing to retain a proof of filing by stamping in and retaining an extra copy of the comments being filed.)

Comments mailed to the addresses indicated as appropriate for hand or courier delivery may be delayed and received after the comment period.

For information on viewing public comments, see the beginning of the **SUPPLEMENTARY INFORMATION** section.

FOR FURTHER INFORMATION CONTACT: Diane Milstead, (410) 786–3355, or Gaysha Brooks, (410) 786–9649

SUPPLEMENTARY INFORMATION:

Submitting Comments: We welcome comments from the public on the proposed work RVUs set forth in Addendum C, the proposed practice expense methodology, and other issues set forth in this proposed notice to assist us in fully considering issues and developing policies. You can assist us by referencing the file code CMS–1512–PN and the specific ''issue identifier'' that precedes the section on which you choose to comment.

Inspection of Public Comments: All comments received before the close of the comment period are available for viewing by the public, including any personally identifiable or confidential business information that is included in a comment. We post all comments received before the close of the comment period on the following Web site as soon as possible after they are received: *http://www.cms.hhs.gov/eRulemaking.* Click on the link ''Electronic Comments on CMS Regulations'' on that Web site to view public comments.

Comments received timely will be available for public inspection as they are received, generally beginning approximately 3 weeks after publication of a document, at the headquarters of the Centers for Medicare & Medicaid Services, 7500 Security Boulevard, Baltimore, Maryland 21244, Monday through Friday of each week from 8:30 a.m. to 4 p.m. To schedule an appointment to view public comments, phone 1–800–743–3951.

Information on the PFS can be found on the CMS homepage. You can access this data by using the following directions:

1. Go to the following Web site *http://www.cms.hhs.gov/PhysicianFeeSched/.*

2. Select ''Physician Fee Schedule Federal Regulation Notices.''

To assist readers in referencing sections contained in this preamble, we are providing the following table of contents.

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  1. Dermatology and Plastic Surgery
  2. Orthopedic Surgery
  3. Gynecology, Urology, Pain Medicine, and Neurosurgery
  4. Radiology, Pathology, and Other Miscellaneous Services
  5. Evaluation and Management Services
  6. Cardiothoracic Surgery
  7. General, Colorectal and Vascular Surgery
  8. Otolaryngology and Ophthalmology
  9. HCPAC Codes
- C. Other Issues Under the 5-Year Review
  1. Anesthesia Services
  2. Discussion of Post-Operative Visits Included in the Global Surgical Packages
  3. Codes Referred to CPT Editorial Panel from Five-Year Review of Work Relative Value Units
  4. Budget Neutrality

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D. Resource-Based Practice Expense (PE) RVUs
1. Current Methodology
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Addendum B: Relative Value Units and Related Information
Addendum C: Codes With Work RVUs Subject to Comment

In addition, because of the many organizations and terms to which we refer by acronym in this proposed notice, we are listing these acronyms and their corresponding terms in alphabetical order below:

AAD American Academy of Dermatology
AAN American Academy of Neurology
AANEM American Association of Neuromuscular and Electrodiagnostic Medicine
AAFP American Academy of Family Physicians
AAGP American Association for Geriatric Psychiatry
AAHCP American Academy of Home Care Physicians
AANS American Association of Neurological Surgeons
AAO American Academy of Ophthalmology
AAO–HNS American Academy of Otolaryngology-Head and Neck Surgery
AAOA American Academy of Otolaryngic Allergy
AAOS American Academy of Orthopaedic Surgeons
AAP American Academy of Pediatrics
AAPM American Academy of Pain Medicine
AAPMR American Academy of Physical Medicine and Rehabilitation
AATS American Association for Thoracic Surgery
ACC American College of Cardiology
ACG American College of Gastroenterology
ACNS American Clinical Neurophysiology Society
ACOG American College of Obstetricians and Gynecologists
ACR American College of Radiology
ACS American College of Surgeons
AFROC Association of Freestanding Radiation Oncology Centers
AGA American Gastroenterological Association
AGS American Geriatric Society
AK Actinic keratoses
AMA American Medical Association
AMDA American Medical Directors Association
AOA American Optometric Association
ASA American Society of Anesthesiologists
ASC Ambulatory surgical center
ASCRS American Society of Colon and Rectal Surgeons
ASGE American Society of Gastrointestinal Endoscopy
ASHA American Speech-Language-Hearing Association
ASPS American Society of Plastic Surgeons
ASSH American Society for Surgery of the Hand
ASTRO American Society for Therapeutic Radiology and Oncology
AUA American Urological Association
BBA 97 Balanced Budget Act of 1997 (Pub. L. 105–33)
BBRA [Medicare, Medicaid and State Child Health Insurance Program] Balanced Budget Refinement Act of 1999 (Pub. L. 106–113)
BNF Budget neutrality factor
CAPU Coalition for the Advancement of Prosthetic Urology
CF Conversion factor
CNS Congress of Neurological Surgeons
CPEP Clinical Practice Expert Panels
CPT Current Procedural Terminology
CY Calendar year
DRG Diagnosis-Related Group
E/M Evaluation and management
FR **Federal Register**
HCPAC Health Care Professionals Advisory Committee
HCPCS Healthcare Common Procedure Coding System
HHS Health and Human Services
ICU Intensive care unit
IDTF Independent diagnostic testing facility
IWPUT Intra-service work per unit of time
JCAAI Joint Council of Allergy, Asthma, and Immunology
MMA Medicare Prescription Drug, Improvement, and Modernization Act of 2003 (Pub. L. 108–173)
MMSV Minimum multi-specialty visit
MPC [the RUC's] Multi-Specialty Points of Comparison
NCQDIS National Coalition of Quality Diagnostic Imaging Services
NPWP Non-physician work pool
NSQIP National Surgical Quality Improvement Program
PC Professional component
PE Practice Expense
PE/HR Practice expense per hour
PEAC Practice Expense Advisory Committee
PERC Practice Expense Review Committee
PFS Physician fee schedule
RFA Regulatory Flexibility Act
RIA Regulatory impact analysis
RN Registered nurse
RUC [AMA's Specialty Society] Relative [Value] Update Committee
RVU Relative value unit
SMS [AMA's] Socioeconomic Monitoring System
SNF Skilled nursing facility
STS Society of Thoracic Surgeons
SVS Society for Vascular Surgery
TC Technical component
VA [Department of] Veterans Affairs

I. Background

[If you choose to comment on issues in this section, please include the caption ''BACKGROUND'' at the beginning of your comments.]

A. Legislative History

Since January 1, 1992, Medicare has paid for physicians' services under section 1848 of the Social Security Act (the Act), ''Payment for Physicians' Services.'' Section 1848 of the Act contains three major elements: (1) A fee schedule for the payment of physicians' services; (2) a sustainable growth rate for the rates of increase in Medicare expenditures for physicians' services; and (3) limits on the amounts that nonparticipating physicians can charge beneficiaries. The Act requires that payments under the fee schedule be based on national uniform relative value units (RVUs) based on the resources used in furnishing a service. Section 1848(c) of the Act requires that national RVUs be established for physician work, practice expense (PE), and malpractice expense.

Section 1848(c)(2)(B)(ii)(II) of the Act provides that adjustments in RVUs may not cause total physician fee schedule (PFS) payments for the year to differ by more than $20 million from the amount that would have been paid had the adjustments not been made. If this tolerance is exceeded, we must make adjustments to the conversion factors (CFs) to preserve budget neutrality.

B. Published Changes to the Physician Fee Schedule

On an annual basis, we publish regulations relating to updates to the RVUs and revisions to the payment policies under the PFS. In the Calendar Year (CY) 2006 Physician Fee Schedule final rule with comment period that appeared in the **Federal Register** on November 21, 2005 (70 FR 70116) (hereinafter referred to as the CY 2006 PFS final rule with comment period), we finalized the CY 2005 interim physician work RVUs, issued new interim work RVUs for new and revised codes for CY 2006, and finalized several other payment policies related to the PFS. This final rule with comment also discussed the status of the third 5-Year Review of work RVUs.

C. Current Proposed Notice

This proposed notice sets forth proposed revisions to work RVUs affecting payment for physicians' services. Section 1848(c)(2)(B)(i) of the Act requires that we review RVUs no less often than every 5 years. We implemented the PFS effective for services furnished beginning January 1, 1992. The first 5-Year Review of work was initiated in December 1994 and was effective for services furnished beginning January 1, 1997. The second 5-Year Review of work was initiated in November 1999 and was effective for services furnished beginning January 1 2002. The third 5-Year Review of work was initiated in November 2004.

Revisions of physician work RVUs proposed in this proposed notice are subject to a 60-day public comment period. We will review public comments, make adjustments to our proposals in response to comments, as appropriate, and include revised values in our CY 2007 Physician Fee Schedule final rule with comment period, effective for services furnished beginning January 1, 2007.

D. The 5-Year Review Process

We initiated the third 5-Year Review by soliciting public comments on potentially misvalued work RVUs for all services in the CY 2005 Physician Fee Schedule final rule with comment period that appeared in the **Federal Register** on November 15, 2004 (69 FR 66370) and provided a 60-day comment period.

We received comments from approximately 35 specialty groups, organizations, and individuals involving over 500 Current Procedural Terminology (CPT) and Healthcare Common Procedure Coding System (HCPCS) codes. As explained in the CY 2006 PFS final rule with comment period (70 FR 70283), we shared these comments with the American Medical Association (AMA) Specialty Society Relative Value Update Committee (RUC). The RUC was formed in November 1991 and grew out of a series of discussions between the AMA and major national medical specialty societies. The work of the RUC is supported by the RUC Advisory Committee, which is made up of representatives of 100 specialty societies in the AMA's House of Delegates.

The RUC currently makes annual recommendations to us on RVUs for new and revised CPT codes. The RUC also provided recommendations on changes to the work RVUs for existing codes during the previous 5-Year Reviews. We believe that the RUC's participation was beneficial because the RUC is experienced in recommending RVUs for the codes that have been added to or revised by the CPT Editorial Panel since we implemented the PFS in 1992. By virtue of its multispecialty membership and consultation with specialty societies, the RUC involves the medical community in formulating its recommendations. For codes used primarily by nonphysician practitioners, the Health Care Professionals Advisory Committee (HCPAC), a companion to the RUC, has made recommendations to us.

As we stated in the previous 5-Year Reviews, we retain the responsibility for analyzing any comments and recommendations received, developing the proposed rule, evaluating the comments on the proposed rule, and deciding whether and how to revise the work RVUs for any given service.

After we sent the RUC the comments we received on potentially misvalued services, as well as a list of approximately 160 services that we had identified as being potentially misvalued, the RUC identified the specialty societies that expressed interest in making presentations concerning those services. To prepare for presentations to the RUC, most specialty societies compiled data using a standard survey instrument whereby respondents compared the surveyed service with similar ''reference'' services that have established, agreed upon work values. Respondents were asked to estimate: the work for the survey code; the time to perform the ''pre-'', ''intra-'', and ''post-'' service activities; and the technical skill, risk, and judgment involved with performing the service. Post-service activities were broken down into hospital and office visits and were assigned an appropriate evaluation and management (E/M) code by the respondent. Each specialty society selected the physician sample that was surveyed. A minimum of 30 responses was required by the RUC for the survey to be considered adequate.

For this 5-Year Review, the RUC permitted a specialty society to use a ''minisurvey'' for some codes if the number of codes a specialty society was reviewing was extremely high. These minisurveys required less information from the respondent, but were similar in design. In addition, the RUC approved the use of information from the National Surgical Quality Improvement Program (NSQIP) database and the Society of Thoracic Surgeons (STS) national database in the valuation of some services.

The NSQIP was started by the Department of Veterans Affairs (VA) for quality improvement purposes in 1991 with 128 VA medical centers, but now includes a large volume of surgical procedures from non-VA medical centers as well. The total number of cases for VA and non-VA medical centers is greater than one million. The NSQIP database contains pre-, intra-, and post-operative data, including intra-service times and length of stay data.

The STS National database is a voluntary reporting system for the collection of outcomes data related to thoracic surgical services. This database currently contains over two million patient records collected from more than 450 practices (from 1995 through 2004). Over 70 percent of the hospitals currently performing heart surgeries in the U.S. reportedly participate in this database.

Some specialty societies used a ''building-block'' approach to validate the survey results for surgical services. In constructing the building blocks, a service is divided into pre-, intra-, and post-service components. The pre-service component consists of all services furnished before the physician makes the skin incision (for example, pre-operative evaluation and scrubbing); the intra-service component consists of the ''skin-to-skin'' time; and the post-service component includes immediate post-surgery services and subsequent hospital and office visits. Each component (or building block) is then assigned work RVUs. Pre-service and intra-service work RVUs are based on time and the intensity of the activities, and post-service work is based on the specified E/M service for each post-operative visit. These three values are then summed to compute ''building-block'' work RVUs.

The results of the surveys were reviewed and organized by the specialty societies and then presented to the RUC. The RUC used eight workgroups, comprised of RUC members, to evaluate a series of clinically related codes based on the survey results and additional discussion. The workgroups also evaluated the relative work (time and intensity) for each service compared to other services on the fee schedule. The workgroups submitted their recommendations to the full RUC, which then considered the workgroup reports and then sent the final RUC recommendations to us.

II. Discussion of Comments and Decisions

A. Review of Comments

As previously stated, we sent the RUC a list of codes for review. The RUC submitted work RVU recommendations for these codes, with the exception of the codes that were withdrawn or referred to the CPT Editorial Panel for further review or action, and one CPT code (32020) for which no specialty society expressed an interest in conducting a survey. In the future, we will consider an alternative method to re-evaluate codes when no specialties express an interest in conducting a survey and we would appreciate suggestions from commenters on what alternative methods could be used.

We analyzed all of the RUC recommendations by evaluating the methodology used by each workgroup to develop the recommendations, the recommended work RVUs, and the rationale for the recommendations.

When appropriate and feasible, if we had concerns about the application of a particular methodology, we assessed whether the recommended work RVUs were appropriate by using alternative methodologies.

In conducting our review of the RUC recommendations we considered whether: (1) The code was part of a completed survey process; (2) the methodology used by the specialty society followed the standard RUC process; (3) the survey respondents stated the work had or had not changed in the past 5 years; (4) databases (for example, STS, NSQIP, and Medicare diagnosis-related group (DRG)) were used in lieu of the standard RUC methodology or as a supplement to the standard methodology; and (5) the intra-service work per unit of time (IWPUT) calculation was used to determine work RVUs in lieu of the standard RUC process. (The IWPUT is derived from components of the ''building-block'' approach, described above, and is used as a measure of service intensity.) Although CMS recognizes that the work values of codes may change over time, it is the responsibility of the specialty society to present compelling evidence that a code is misvalued.

We have some concerns that many of the codes that were reviewed in the second 5-Year Review have been brought back again for further consideration. The main purpose of the 5-Year Review is to identify those services that need to be revalued because the work involved in performing the service has changed. Since there have been three opportunities for specialties to have services that are believed to be undervalued reviewed, we expect that, for the most part, only those services where there is compelling evidence of a change in the work will be considered for further review. However, because there has been little incentive for specialties to bring codes that may be overvalued for review, such services will still need to be identified for the next 5-Year Review.

Table 1, Five-Year Review of Work Relative Value Units, lists the codes reviewed during the 5-Year Review. This table includes the following information:

- *CPT/HCPCS Code.* This is the CPT or alphanumeric HCPCS code for a service.
- *Modifier.* A modifier -26 is shown if the work RVUs represent the professional component of the service.
- *Description.* This is an abbreviated version of the narrative description of the code.
- *2005 Work RVU.* The work RVUs that appeared in the CY 2005 Physician Fee Schedule final rule with comment period are shown for each reviewed code.
- *Requested Work RVU.* This column identifies the work RVUs requested by the commenting specialty society or individual commenter. If we received more than one comment on a code, the code is listed more than once with the recommended RVUs. If the commenters did not recommend specific RVUs, we indicate this by ''N/A''. A ''WD'' (withdrawal) indicates that the commenter withdrew the request for review of a code and chose not to pursue review of the code under the 5-Year Review and that no RUC recommendation was received.
- *RUC Recommendation.* This column identifies the work RVUs recommended by the RUC. ''CPT'' indicates that the RUC referred this code to the AMA CPT Editorial Panel for review and clarification and recommended maintaining the current work RVUs. An ''(a)'' indicates the commenting specialty society withdrew the proposal, and therefore, the RUC recommends maintaining the current work RVUs. A ''(b)'' in this column indicates there was no RUC recommendation.

HCPAC Recommendation. This column identifies the work RVUs recommended by the HCPAC. An ''(a)'' indicates that the commenting specialty society withdrew the proposal; therefore, the HCPAC recommends maintaining the current work RVUs. A ''(b)'' in this column indicates there was no HCPAC recommendation.

- *CMS Proposal.* This column indicates whether we agreed with the RUC recommendation (''Agree''); we are instead proposing to maintain the present work RVUs (''Disagree''); we are proposing work RVUs higher than the RUC recommendation (''Disagree/+''); or we are proposing work RVUs that are less than the RUC recommendation (''Disagree/-''). Codes for which we did not accept the RUC recommendation are discussed in greater detail following Table 1. A ''(c)'' in this column indicates that in the absence of a RUC/HCPAC recommendation we are proposing to maintain the present work RVUs.
- *Proposed base work RVU.* This column contains the 2007 proposed work RVUs. The proposed work RVUs for surgical services with a 10- or 90-day global period do not include the application of the RUC-recommended work values for E/M services. However, the additional work value attributed to the increase for E/M services included as part of the global period is reflected in the work RVUs contained in Addenda B and C of this proposed rule. (**Note:** ** denotes codes that were deleted for 2006.)

The following is a summary of our response to the RUC-recommended work RVUs for the 5-Year Review of work. We sent the RUC approximately 709 codes to review. The RUC referred 136 codes to the CPT Editorial Panel for review and 151 codes were withdrawn by the specialty societies. We accepted the RUC's recommended work RVUs for 299 of the services reviewed and disagreed with the RUC's recommended work RVUs for 123 of the services reviewed. Of the 123 services for which we did not accept the RUC's recommended work RVUs, we increased the work RVUs for 3 services, recommended maintaining the current work RVUs for 48 services, and decreased the work RVUs for 72 services. (**Note:** 12 CPT codes for nursing facility and rest home services that were referred to the AMA CPT Editorial Panel were deleted for 2007.)

Additionally, the HCPAC reviewed a total of 7 services as part of the 5-Year Review. Of the 7 services reviewed by the HCPAC, we accepted the HCPAC recommendations for 1 service, recommended maintaining the current work RVU for 1 service, decreased the work RVUs for 4 services, and 1 code was withdrawn by the specialty society.

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TABLE 1: Five-Year Review of Work Relative Value Units

CPT/ HCPCS Code	Mod	Descriptor	2005 Work RVU	Requested Work RVU	RUC REC	HCPAC REC	CMS Proposal	Proposed Work RVU
00797		Anesth, Surgery for Obesity	8.00	11.00	11.00		Agree	11.00
10060		Drainage of skin abscess	1.17	1.50	---------- -	1.50	Disagree	1.17
11040		Debride skin, partial	0.50	0.65	---------- -	0.55	Disagree/-	0.48
11041		Debride skin, full	0.82	0.80	---------- -	0.80	Disagree/-	0.60
11042		Debride skin/tissue	1.12	1.20	---------- -	1.12	Disagree/-	0.80
11100		Biopsy, skin lesion	0.81	1.00	0.81		Agree	0.81
11400		Exc tr-ext b9+marg 0.5<cm	0.85	1.13	0.85		Agree	0.85
11401		Exc tr-ext b9+marg 0.6-1cm	1.23	1.43	1.23		Agree	1.23
11402		Exc tr-ext b9+marg 1.1-2 cm	1.51	1.80	1.40		Agree	1.40
11403		Exc tr-ext b9+marg 2.1-3 cm	1.79	2.20	1.79		Agree	1.79
11404		Exc tr-ext b9+marg 3.1-4 cm	2.06	2.08	2.06		Agree	2.06
11406		Exc tr-ext b9+marg >4.0cm	2.76	3.80	3.20		Agree	3.20
11420		Exc h-f-nk-sp b9+marg 0.5<	0.98	1.50	0.98		Agree	0.98
11421		Exc h-f-nk-sp b9+marg 0.6-1	1.42	2.15	1.42		Agree	1.42
11422		Exc h-f-nk-sp b9+marg 1.1-2	1.63	2.25	1.63		Agree	1.63
11423		Exc h-f-nk-sp b9+marg 2.1-3	2.01	2.24	2.01		Agree	2.01
11424		Exc h-f-nk-sp b9+marg 3.1-4	2.43	2.61	2.43		Agree	2.43
11426		Exc h-f-nk-sp b9+marg >4.0 cm	3.77	3.78	3.77		Agree	3.77
11440		Exc face-mm b9+marg 0.5 < cm	1.06	1.65	1.00		Agree	1.00
11441		Exc face-mm b9+marg 0.6-1 cm	1.48	1.83	1.48		Agree	1.48
11442		Exc face-mm b9+marg 1.1-2 cm	1.72	2.00	1.72		Agree	1.72
11443		Exc face-mm b9+marg 2.1-3 cm	2.29	2.73	2.29		Agree	2.29
11444		Exc face-mm b9+marg 3.1-4 cm	3.14	3.30	3.14		Agree	3.14
11446		Exc face-mm b9+marg >4 cm	4.48	4.50	4.48		Agree	4.48
11450		Removal, sweat gland lesion	2.73	WD	(a)		(c)	2.73
11451		Removal, sweat gland lesion	3.94	WD	(a)		(c)	3.94
11462		Removal, sweat gland lesion	2.51	WD	(a)		(c)	2.51
11463		Removal, sweat gland lesion	3.94	WD	(a)		(c)	3.94
11470		Removal, sweat gland lesion	3.25	WD	(a)		(c)	3.25
11471		Removal, sweat gland lesion	4.40	WD	(a)		(c)	4.40
11600		Exc tr-ext mlg+marg 0.5<cm	1.31	1.60	1.31		Agree	1.31
11601		Exc tr-ext mlg+marg 0.6-1cm	1.80	2.10	1.75		Agree	1.75
11602		Exc tr-ext mlg+marg 1.1-2cm	1.95	2.50	1.95		Agree	1.95
11603		Exc tr-ext mlg+marg 2.1-3<cm	2.19	3.42	2.50		Agree	2.50
11604		Exc tr-ext mlg+marg 3.1-4cm	2.40	3.80	2.85		Agree	2.85
11606		Exc tr-ext mlg+marg >4cm	3.42	5.25	4.70		Agree	4.70
11620		Exc h-f-nk-sp mlg+marg 0.5<	1.19	1.78	1.32		Agree	1.32
11621		Exc h-f-nk-sp mlg+marg 0.6-1	1.76	2.13	1.76		Agree	1.76
11622		Exc h-f-nk-sp mlg+marg 1.1-2	2.09	2.70	2.09		Agree	2.09
11623		Exc h-f-nk-sp mlg+marg 2.1-3	2.61	3.06	2.79		Agree	2.79
11624		Exc h-f-nk-sp mlg+marg 3.1-4	3.06	3.48	3.30		Agree	3.30
11626		Exc h-f-nk-sp mlg+marg >4cm	4.29	4.90	4.29		Agree	4.29
11640		Exc face-mm malig+marg 0.5<	1.35	1.85	1.35		Agree	1.35
11641		Exc face-mm malig+marg 0.6-1	2.16	2.50	1.85		Agree	1.85
11642		Exc face-mm malig+marg 1.1-2	2.59	2.50	2.30		Agree	2.30
11643		Exc face-mm malig+marg 2.1-3	3.10	3.60	3.10		Agree	3.10
11644		Exc face-mm malig+marg 3.1-4	4.02	4.61	4.02		Agree	4.02
11646		Exc face-mm malig+marg>4	5.94	6.30	5.94		Agree	5.94
11730		Removal of nail plate	1.13	1.10	------	1.10	Agree	1.10

CPT/ HCPCS Code	Mod	Descriptor	2005 Work RVU	Requested Work RVU	RUC REC	HCPAC REC	CMS Proposal	Proposed Work RVU
11960		Insert tissue expander (s)	9.07	WD	(a)		(c)	9.07
12052		Layer closure of wound(s)	2.77	3.20	2.77		Agree	2.77
13121		Repair of wound or lesion	4.32	4.56	4.32		Agree	4.32
14040		Skin tissue rearrangement	7.86	8.55	7.86		Agree	7.86
14060		Skin tissue rearrangement	8.49	9.10	8.49		Agree	8.49
15100		Skin split graft	9.04	9.00	9.04		Agree	9.04
15240		Skin full graft	9.03	9.40	9.03		Agree	9.03
15732		Muscle-skin graft, head/neck	17.81	18.25	CPT		CPT	17.81
15734		Muscle-skin graft, trunk	17.76	18.33	17.76		Agree	17.76
15831		Excise excessive skin tissue	12.38		CPT		CPT	12.38
17003		Destroy lesions, 2-14	0.15	0.55	0.07		Agree	0.07
17004		Destroy lesions, 15 or more	2.79	2.20	1.80		Disagree/-	1.58
17262		Destruction of skin lesions	1.58	1.70	1.58		Agree	1.58
17281		Destruction of skin lesions	1.72	1.80	1.72		Agree	1.72
17304		1 stage mohs, up to 5 spec	7.59	9.50	CPT		CPT	7.59
17305		2 stage mohs, up to 5 spec	2.85	6.00	CPT		CPT	2.85
19180		Removal of breast	8.79	15.25	14.67		Agree	14.67
19361		Breast reconstruction	19.23	WD	(a)		(c)	19.23
20600		Drain/inject, joint/bursa	0.66	0.94	0.66		Agree	0.66
20610		Drain/inject, joint/bursa	0.79	1.80	0.79		Agree	0.79
20680		Removal of support implant	3.34	6.50	5.86		Agree	5.86
20692		Apply bone fixation device	6.40	15.00	CPT		CPT	6.40
21145		Reconstruct midface, lefort	19.91	23.50	21.84		Agree	21.84
21146		Reconstruct midface, lefort	20.68	27.50	22.55		Agree	22.55
21147		Reconstruct midface, lefort	21.74	28.13	23.32		Agree	23.32
21365		Treat cheek bone fracture	14.93	WD	(a)		(c)	14.93
21366		Treat cheek bone fracture	17.74	WD	(a)		(c)	17.74
21395		Treat eye socket fracture	12.66	16.00	13.88		Agree	13.88
21432		Treat craniofacial fracture	8.60	WD	(a)		(c)	8.60
21435		Treat craniofacial fracture	17.22	WD	(a)		(c)	17.22
21436		Treat craniofacial fracture	28.00	WD	(a)		(c)	28.00
21470		Treat lower jaw fracture	15.32	WD	(a)		(c)	15.32
21556		Remove lesion neck/chest	5.56	15.50	CPT		CPT	5.56
21935		Remove tumor, back	17.93	WD	(a)		(c)	17.93
22520		Percut vertebroplasty thor	8.90	8.90	8.90		Agree	8.90
22554		Neck spine fusion	18.59	16.40	16.40		Agree	16.40
22612		Lumbar spine fusion	20.97	22.58	22.00		Disagree	20.97
22840		Insert spine fixation device	12.52	12.52	12.52		Agree	12.52
23076		Removal of shoulder lesion	7.62	15.00	CPT		CPT	7.62
23200		Removal of collar bone	12.06	24.00	CPT		CPT	12.06
23210		Removal of shoulder blade	12.47	28.00	CPT		CPT	12.47
23220		Partial removal of humerus	14.54	28.00	CPT		CPT	14.54
23515		Treat clavicle fracture	7.40	N/A	CPT		CPT	7.40
23585		Treat scapula fracture	8.95	N/A	CPT		CPT	8.95
23615		Treat humerus fracture	9.34	N/A	CPT		CPT	9.34
23616		Treat humerus fracture	21.24	N/A	CPT		CPT	21.24
23630		Treat humerus fracture	7.34	N/A	CPT		CPT	7.34

CPT/ HCPCS Code	Mod	Descriptor	2005 Work RVU	Requested Work RVU	RUC REC	HCPAC REC	CMS Proposal	Proposed Work RVU
23670		Treat dislocation/fracture	7.89	N/A	CPT		CPT	7.89
23680		Treat dislocation/fracture	10.04	N/A	CPT		CPT	10.04
24076		Remove arm/elbow lesion	6.29	16.00	CPT		CPT	6.29
24077		Remove tumor of arm, elbow	11.74	22.00	CPT		CPT	11.74
24150		Extensive humerus surgery	13.25	30.00	CPT		CPT	13.25
24151		Extensive humerus surgery	15.56	WD	(a)		(c)	15.56
24152		Extensive radius surgery	10.04	25.00	CPT		CPT	10.04
24153		Extensive radius surgery	11.52	WD	(a)		(c)	11.52
24363		Replace elbow joint	18.46	21.00	21.07		Agree	21.07
24430		Repair of humerus	12.79	15.50	14.00		Agree	14.00
24545		Treat humerus fracture	10.44	N/A	CPT		CPT	10.44
24546		Treat humerus fracture	15.67	N/A	CPT		CPT	15.67
24575		Treat humerus fracture	10.64	N/A	CPT		CPT	10.64
24579		Treat humerus fracture	11.58	N/A	CPT		CPT	11.58
24635		Treat elbow fracture	13.17	N/A	CPT		CPT	13.17
24665		Treat radius fracture	8.13	N/A	CPT		CPT	8.13
24685		Treat ulnar fracture	8.79	N/A	CPT		CPT	8.79
25076		Removal forearm lesion deep	4.91	15.00	CPT		CPT	4.91
25077		Remove tumor, forearm/wrist	9.75	22.00	CPT		CPT	9.75
25170		Extensive forearm surgery	11.07	26.00	CPT		CPT	11.07
25447		Repair wrist joint(s)	10.35	10.35	10.35		Agree	10.35
25515		Treat fracture of radius	9.17	N/A	CPT		CPT	9.17
25526		Treat fracture of radius	12.96	N/A	CPT		CPT	12.96
25545		Treat fracture of ulna	8.89	N/A	CPT		CPT	8.89
25574		Treat fracture radius & ulna	7.00	N/A	CPT		CPT	7.00
25575		Treat fracture radius/ulna	10.43	N/A	CPT		CPT	10.43
25620		Treat fracture radius ulna	8.54	N/A	CPT		CPT	8.54
25628		Treat wrist bone fracture	8.42	N/A	CPT		CPT	8.42
26055		Incise finger tendon sheath	2.69	3.99	2.69		Agree	2.69
26160		Remove tendon sheath lesion	3.15	4.05	3.15		Agree	3.15
26600		Treat metacarpal fracture	1.96	2.40	2.40		Agree	2.40
26615		Treat metacarpal fracture	5.32	N/A	CPT		CPT	5.32
26665		Treat thumb fracture	7.59	N/A	CPT		CPT	7.59
26685		Treat hand dislocation	6.97	N/A	CPT		CPT	6.97
26715		Treat knuckle dislocation	5.73	N/A	CPT		CPT	5.73
26735		Treat finger fracture, each	5.97	N/A	CPT		CPT	5.97
26746		Treat finger fracture, each	5.80	N/A	CPT		CPT	5.80
26765		Treat finger fracture, each	4.16	N/A	CPT		CPT	4.16
26785		Treat finger dislocation	4.20	N/A	CPT		CPT	4.20
26951		Amputation of finger/thumb	4.58	6.00	5.25		Agree	5.25
27048		Remove hip/pelvis lesion	6.24	18.00	CPT		CPT	6.24
27049		Remove tumor, hip/pelvis	13.64	28.00	CPT		CPT	13.64
27076		Extensive hip surgery	22.09	40.00	CPT		CPT	22.09
27078		Extensive hip surgery	13.42	35.00	CPT		CPT	13.42
27130		Total hip arthroplasty	20.09	20.09	20.09		Disagree/-	15.96
27236		Treat thigh fracture	15.58	15.58	15.58		Disagree/-	12.77
27248		Treat thigh fracture	10.43	N/A	CPT		CPT	10.43

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27328		Removal of thigh lesion	5.56	17.00	CPT		CPT	5.56
27329		Remove tumor, thigh/knee	14.12	25.00	CPT		CPT	14.12
27365		Extensive leg surgery	16.25	30.00	CPT		CPT	16.25
27447		Total knee arthroplasty	21.45	21.45	21.45		Disagree/-	19.30
27465		Shortening of thigh bone	13.85	17.50	17.50		Agree	17.50
27470		Repair of thigh	16.05	16.05	16.05		Agree	16.05
27472		Repair/graft of thigh	17.69	19.82	CPT		CPT	17.69
27511		Treatment of thigh fracture	13.62	N/A	CPT		CPT	13.62
27513		Treatment of thigh fracture	17.89	N/A	CPT		CPT	17.89
27514		Treatment of thigh fracture	17.27	N/A	CPT		CPT	17.27
27519		Treat thigh fx growth plate	15.00	N/A	CPT		CPT	15.00
27535		Treat knee fracture	11.48	N/A	CPT		CPT	11.48
27540		Treat knee fracture	13.08	N/A	CPT		CPT	13.08
27556		Treat knee dislocation	14.39	N/A	CPT		CPT	14.39
27603		Drain lower leg lesion	4.93	WD	(a)		(c)	4.93
27615		Removel tumor, lower leg	12.54	23.00	CPT		CPT	12.54
27619		Remove lower leg lesion	8.39	16.00	CPT		CPT	8.39
27645		Extensive lower leg surgery	14.15	30.00	CPT		CPT	14.15
27646		Extensive lower leg surgery	12.64	25.00	CPT		CPT	12.64
27647		Extensive ankle/heel surgery	12.22	20.00	CPT		CPT	12.22
27709		Incision of tibia and fibula	9.94	19.00	16.50		Agree	16.50
27720		Repair of tibia	11.77	18.50	CPT		CPT	11.77
27766		Treatment of ankle fracture	8.35	N/A	CPT		CPT	8.35
27784		Treatment of fibula fracture	7.10	N/A	CPT		CPT	7.10
27792		Treatment of ankle fracture	7.65	N/A	CPT		CPT	7.65
27814		Treatment of ankle fracture	10.66	N/A	CPT		CPT	10.66
27822		Treatment of ankle fracture	10.98	N/A	CPT		CPT	10.98
27826		Treat lower leg fracture	8.53	N/A	CPT		CPT	8.53
27827		Treat lower leg fracture	14.04	N/A	CPT		CPT	14.04
27828		Treat lower leg fracture	16.21	N/A	CPT		CPT	16.21
27829		Treat lower leg joint	5.48	N/A	CPT		CPT	5.48
27832		Treat lower leg dislocation	6.48	N/A	CPT		CPT	6.48
27880		Amputation of lower leg	11.83	13.75	13.75		Agree	13.75
28045		Excision of foot lesion	4.71	14.00	CPT		CPT	4.71
28415		Treat heel fracture	15.95	N/A	CPT		CPT	15.95
28445		Treat ankle fracture	15.60	N/A	CPT		CPT	15.60
28465		Treat mid foot fracture, each	7.00	N/A	CPT		CPT	7.00
28485		Treat metatarsal fracture	5.70	N/A	CPT		CPT	5.70
28505		Treat big toe fracture	3.80	N/A	CPT		CPT	3.80
28525		Treat toe fracture	3.32	N/A	CPT		CPT	3.32
28555		Repair foot dislocation	6.29	N/A	CPT		CPT	6.29
28585		Repair foot dislocation	7.98	N/A	CPT		CPT	7.98
28615		Repair foot dislocation	7.76	N/A	CPT		CPT	7.76
28645		Repair toe dislocation	4.21	N/A	CPT		CPT	4.21
28675		Repair toe dislocation	2.92	N/A	CPT		CPT	2.92
28805		Amputation thru metatarsal	8.38	11.25	11.25		Agree	11.25
29075		Application of forearm cast	0.77	0.89	0.77		Agree	0.77

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29580		Application of paste boot	0.57	0.60	----------	0.60	Disagree/-	0.55
30520		Repair of nasal septum	5.69	7.13	6.27		Agree	7.13
31225		Removal of upper jaw	19.20	24.00	24.00		Agree	24.00
31230		Removal of upper jaw	21.91	28.00	28.00		Agree	28.00
31255		Removal of ethmoid sinus	6.95	WD	(a)		(c)	6.95
31360		Removal of larynx	17.05	28.00	28.00		Disagree/-	24.00
31365		Removal of larynx	24.12	37.00	37.00		Disagree/-	31.50
31367		Partial removal of larynx	21.83	28.00	27.36		Disagree/-	24.00
31368		Partial removal of larynx	27.05	36.00	36.00		Disagree/-	30.50
31370		Partial removal of larynx	21.35	25.00	25.00		Disagree/-	24.00
31375		Partial removal of larynx	20.18	25.00	25.00		Disagree/-	22.50
31380		Partial removal of larynx	20.18	25.00	25.00		Disagree/-	22.00
31382		Partial removal of larynx	20.49	28.00	28.00		Disagree/-	25.00
31390		Removal of larynx & pharynx	27.49	40.00	40.00		Disagree/-	35.00
31395		Reconstruct larynx & pharynx	31.04	44.00	44.00		Disagree/-	39.50
31575		Diagnostic laryngoscopy	1.10	1.53	1.10		Agree	1.53
31579		Diagnostic laryngoscopy	2.26	2.54	2.26		Agree	2.54
31622		Dx bronchoscope/wash	2.78	2.80	2.78		Agree	2.78
32020		Insertion of chest tube	3.97	N/A	(b)		(c)	3.29
32095		Biopsy through chest wall	8.35	WD	(a)		(c)	8.35
32141		Remove treat lung lesions	13.98	25.48	23.90		Disagree	13.98
32442		Sleeve pneumonectomy	26.20	55.50	51.45		Disagree/-	32.86
32445		Removal of lung	25.05	62.69	57.74		Disagree/-	34.95
32484		Segmentectomy	20.66	25.27	23.25		Disagree	20.66
32486		Sleeve lobectomy	23.88	43.94	39.44		Disagree/-	28.40
32488		Complection pneumonectomy	25.67	40.97	38.95		Disagree/-	28.87
32540		Removal of lung lesion	14.62	28.44	26.42		Disagree/-	19.94
32651		Thoracoscopy, surgical	12.89	18.67	16.64		Disagree/-	14.26
32652		Thoracoscopy, surgical	18.63	27.73	26.35		Disagree/-	20.75
32653		Thoracoscopy, surgical	12.85	17.62	16.24		Disagree/+	18.05
32654		Thoracoscopy, surgical	12.42	20.34	17.73		Disagree/-	15.82
32655		Thoracoscopy, surgical	13.08	16.06	14.69		Disagree/-	13.59
32657		Thoracoscopy, surgical	13.63	12.97	11.90		Disagree	13.63
32662		Thoracoscopy, surgical	16.42	15.36	14.29		Disagree	16.42
32663		Thoracoscopy, surgical	18.44	24.57	23.00		Disagree	18.44
32665		Thoracoscopy, surgical	15.52	21.05	19.56		Disagree	15.52
32815		Close bronchial fistula	23.12	46.99	42.94		Disagree/-	31.17
33140		Heart vevascularize (lmr)	19.97	32.50	25.49		Disagree	19.97
33141		Heart lmr w/other procedure	4.83	2.43	2.43		Disagree	4.83
33208		Insertion of heart pacemaker	8.12	8.12	8.12		Agree	8.12
33300		Repair of heart wound	17.89	46.05	40.03		Disagree/-	25.09
33305		Repair of heart wound	21.41	74.23	70.21		Disagree/-	27.05
33400		Repair of aortic valve	28.46	40.30	38.33		Disagree/-	36.23
33405		Replacement of aortic valve	34.95	39.78	37.82		Disagree/-	36.64
33406		Repacement of aortic valve	37.44	51.14	49.18		Disagree/-	45.54
33410		Replacement of aortic valve	32.41	44.87	42.91		Disagree/-	35.36
33411		Replacement of aortic valve	36.20	63.36	56.91		Disagree/-	52.12

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33413		Replacement of aortic valve	43.43	63.09	56.19		Disagree/-	51.76
33414		Repair of aortic valve	30.30	40.00	36.52		Agree	36.52
33415		Revision, subvalvular tissue	27.11	37.00	34.58		Disagree	27.11
33416		Revise ventricule muscle	30.30	37.00	34.25		Agree	34.25
33425		Repair of mitral valve	26.96	52.53	45.97		Disagree/-	34.55
33426		Repair of mitral valve	32.95	41.86	39.78		Disagree/-	37.95
33427		Repair of mitral valve	39.94	44.35	41.82		Disagree	39.94
33430		Replacement of mitral valve	33.45	54.05	46.45		Disagree/-	45.57
33460		Revision of tricuspid valve	23.56	50.75	40.19		Disagree	23.56
33463		Valvuloplasty, tricuspid	25.58	57.01	50.93		Disagree/-	36.59
33464		Valvuloplasty, tricuspid	27.29	44.85	40.30		Disagree/-	26.78
33465		Replace tricuspid valve	28.75	51.80	45.72		Disagree	28.75
33474		Revision of pulmonary valve	23.01	39.41	36.39		Disagree	23.01
33475		Replacement, pulmonary valve	32.95	41.76	39.39		Disagree/+	41.97
33505		Repair artery w/tunnel	26.80	36.00	36.00		Agree	36.00
33510		CABG, vein, single-vein single	28.96	36.49	31.75		Disagree/-	30.37
33511		CABG, vein, two	29.96	39.96	35.22		Disagree/-	31.51
33512		CABG, vein, three	31.75	46.55	40.26		Disagree/-	35.16
33513		CABG, vein, four	31.95	47.94	41.65		Disagree/-	36.12
33514		CABG, vein, five	32.70	50.65	44.36		Disagree/-	36.93
33516		Cabg, vein, six or more	34.95	52.33	46.04		Disagree/-	38.39
33517		CABG, artery	2.57	3.36	3.36		Disagree	2.57
33518		CABG, artery-vein, two	4.84	7.41	7.41		Disagree	4.84
33519		CABG, artery-vein, three	7.11	9.91	9.91		Disagree	7.11
33521		CABG, artery-vein, four	9.39	12.01	12.01		Disagree	9.39
33522		CABG, artery-vein, five	11.65	13.53	13.53		Disagree	11.65
33523		CABG, art-vein, six or more	13.93	15.39	15.39		Disagree	13.93
33530		Coronary artery, bypass/reop	5.85	9.78	9.78		Disagree	5.85
33533		CABG, arterial, single	29.96	32.66	30.85		Disagree/+	34.63
33534		CABG, arterial, two	32.15	38.79	36.98		Disagree/-	36.06
33535		CABG, arterial, three	34.45	43.66	41.85		Disagree/-	38.73
33536		Cabg, arterial, four or more	37.44	47.34	45.53		Disagree/-	38.04
33542		Removal of heart lesion	28.81	50.28	44.20		Disagree	28.81
33545		Repair of heart damage	36.72	64.12	52.49		Disagree	36.72
33641		Repair heart septum defect	21.36	28.52	27.71		Disagree/-	26.70
33665		Repair of heart defects	28.56	32.98	32.98		Agree	32.98
33684		Repair heart septum defect	29.61	32.50	32.50		Agree	32.50
33688		Repair heart septum defect	30.57	33.98	32.88		Agree	32.88
33771		Repair great vessels defect	34.60	39.50	38.50		Agree	38.50
33779		Repair great vessels defect	36.16	42.00	41.00		Agree	41.00
33781		Repair great vessels defect	36.40	42.00	41.00		Agree	41.00
33860		Ascending aortic graft	37.94	62.54	55.45		Disagree/-	39.29
33863		Ascending aortic graft	44.93	61.85	55.10		Disagree	44.93
33877		Thoracoabdominal graft	42.54	64.04	64.04		Disagree/-	53.00
33945		Transplantation of heart	42.04	90.22	80.84		Disagree	42.04
34001		Removal of artery clot	12.89	16.25	16.25		Agree	16.25
34201		Removal of artery clot	10.01	19.26	18.31		Disagree/-	17.00

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34471		Removal of vein clot	10.16	20.00	20.00		Agree	20.00
35081		Repair defect of artery	27.97	34.55	31.00		Agree	31.00
35102		Repair defect of artery	30.71	39.80	36.28		Disagree/-	34.00
35216		Repair blood vessel lesion	18.72	33.57	34.00		Agree	34.00
35381		Rechanneling of artery	15.79	N/A	CPT		CPT	15.79
35501		Artery bypass graft	19.16	N/A	CPT		CPT	19.16
35506		Artery bypass graft	19.64	23.75	23.75		Agree	23.75
35507		Artery bypass graft	19.64	N/A	CPT		CPT	19.64
35508		Artery bypass graft	18.62	25.00	25.00		Agree	25.00
35509		Artery bypass graft	18.04	N/A	CPT		CPT	18.04
35515		Artery bypass graft	18.62	25.00	25.00		Agree	25.00
35516		Artery bypass graft	16.30	23.00	23.00		Agree	23.00
35541		Artery bypass graft	25.76	N/A	CPT		CPT	25.76
35546		Artery bypass graft	25.50	N/A	CPT		CPT	25.50
35556		Artery bypass graft	21.73	31.58	27.25		Disagree/-	25.00
35566		Artery bypass graft	26.88	39.20	32.00		Disagree/-	30.00
35583		Vein bypass graft	22.34	32.26	26.00		Agree	26.00
35585		Vein bypass graft	28.35	39.42	32.00		Disagree/-	30.00
35600		Harvest artery for cabg	4.94	WD	(a)		(c)	4.94
35601		Artery bypass graft	17.47	N/A	CPT		CPT	17.47
35606		Artery bypass graft	18.68	21.00	21.00		Agree	21.00
35612		Artery bypass graft	15.74	WD	(a)		(c)	15.74
35616		Artery bypass graft	15.68	22.00	21.00		Agree	21.00
35641		Artery bypass graft	24.53	N/A	CPT		CPT	24.53
35642		Artery bypass graft	17.95	WD	(a)		(c)	17.95
35820		Explore chest vessels	12.86	38.76	32.24		Disagree/-	25.53
37720		Removal of leg vein	5.65	N/A	CPT		CPT	5.65
38100		Removal of spleen, total	14.48	19.53	18.00		Agree	18.00
38101		Removal of spleen, partial	15.29	18.00	18.00		Agree	18.00
38115		Repair of ruptured spleen	15.80	20.00	20.00		Agree	20.00
38700		Removal of lymph nodes, neck	8.23	12.00	12.00		Agree	12.00
38720		Removal of lymph nodes, neck	13.59	20.00	20.00		Agree	20.00
38724		Removal of lymph nodes, neck	14.52	22.00	22.00		Agree	22.00
39220		Removal chest lesion	17.39	19.97	18.40		Disagree	17.39
39400		Visualization of chest	5.60	7.61	7.61		Disagree	5.60
41100		Biopsy of tongue	1.63	1.54	1.63		Disagree/-	1.37
41120		Partial removal of tongue	9.76	10.00	9.76		Agree	9.76
41130		Partial removal of tongue	11.13	14.00	14.00		Agree	14.00
41135		Tongue and neck surgery	23.06	27.00	27.00		Agree	27.00
41140		Removal of tongue	25.46	25.00	25.46		Agree	25.46
41145		Tongue removal, neck surgery	30.01	34.00	34.00		Agree	34.00
41150		Tongue, mouth, jaw surgery	23.01	26.50	26.50		Agree	26.50
41153		Tongue, mouth, neck surgery	23.73	34.00	34.00		Disagree/-	30.00
41155		Tongue, jaw, & neck surgery	27.68	40.00	40.00		Disagree/-	36.00
42120		Remove plate/lesion	6.16	11.00	11.00		Agree	11.00
42842		Extensive surgery of throat	8.75	11.00	11.00		Agree	11.00
42844		Extensive surgery of throat	14.29	16.10	16.10		Agree	16.10

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42845		Extensive surgery of throat	24.25	32.00	32.00		Disagree/-	29.00
42890		Partial removal of pharynx	12.92	17.00	17.00		Agree	17.00
42892		Revision of pharyngeal walls	15.81	23.09	23.09		Agree	23.09
42894		Revision of pharyngeal walls	22.85	30.00	30.00		Agree	30.00
43108		Removal of esophagus	34.14	81.36	76.55		Disagree/-	57.20
43113		Removal of esophagus	35.22	75.56	73.23		Disagree/-	40.41
43116		Partial removal of esophagus	31.17	89.49	87.16		Disagree/-	65.85
43118		Partial removal of esophagus	33.15	65.89	61.08		Disagree/-	46.37
43121		Partial removal of esophagus	29.15	48.92	46.59		Disagree/-	41.80
43123		Partial removal of esophagus	33.15	80.95	76.14		Disagree/-	57.14
43124		Removal of esophagus	27.28	62.83	60.61		Disagree/-	56.51
43135		Removal of esophagus pouch	16.08	25.66	24.20		Disagree/-	20.52
43235		Uppr gi endoscopy, diagnosis	2.39	2.39	2.39		Agree	2.39
43246		Place gastrostomy tube	4.32	4.32	4.32		Agree	4.32
43496		Free jejunum flap, microvasc	0.00	WD	(a)		(c)	0.00
43620		Removal of stomach	29.99	31.00	31.00		Agree	31.00
43621		Removal of stomach	30.68	39.62	36.00		Agree	36.00
43622		Removal of stomach	32.48	35.00	36.50		Agree	36.50
43632		Removal of stomach, partial	22.56	30.57	32.00		Agree	32.00
43633		Removal of stomach, partial	23.07	32.16	30.00		Agree	30.00
43634		Removal of stomach, partial	25.08	33.50	33.50		Agree	33.50
43750		Place gastrostomy tube	4.48	5.00	4.48		Agree	4.48
43820		Fusion of stomach and bowel	15.35	20.45	20.00		Agree	20.00
43840		Repair of stomach lesion	15.54	22.45	20.00		Agree	20.00
44120		Removal of small intenstive	16.97	23.43	20.11		Disagree/-	18.00
44130		Bowel to bowel fusion	14.47	21.27	20.87		Disagree/-	20.00
44140		Partial removal of colon	20.97	21.26	20.97		Agree	20.97
44141		Partial removal of colon	19.48	27.00	27.00		Agree	27.00
44143		Partial removal of colon	22.96	26.69	25.00		Agree	25.00
44144		Partial removal of colon	21.50	27.00	27.00		Agree	27.00
44145		Partial removal of colon	26.38	26.38	26.38		Agree	26.38
44146		Partial removal of colon	27.50	33.00	33.00		Agree	33.00
44147		Partial removal of colon	20.68	31.00	31.00		Agree	31.00
44150		Removal of colon	23.91	29.46	27.50		Agree	27.50
44151		Removal of colon/leostomy	26.84	31.00	32.00		Agree	32.00
44152		Removal of colon/leostomy	27.79	N/A	CPT		CPT	27.79
44153		Removal of colon/leostomy	30.54	N/A	CPT		CPT	30.54
44155		Removal of colon/leostomy	27.82	34.32	31.50		Agree	31.50
44156		Removal of colon/leostomy	30.74	34.50	34.50		Agree	34.50
44602		Suture, small intestine	16.01	24.35	22.00		Agree	22.00
44603		Suture, small intestine	18.63	25.00	25.00		Agree	25.00
44604		Suture, large intestine	16.01	WD	(a)		(c)	16.01
44605		Repair of bowel lesion	19.50	WD	(a)		(c)	19.50
45020		Drainage of rectal abscess	4.71	7.75	7.75		Agree	7.75
45300		Proctosigmoidoscopy w/bx	0.38	0.92	0.91		Disagree	0.38
45303		Proctosigmoidoscoy dilate	0.44	2.89	2.22		Disagree	0.44
45305		Procosigmoidoscopy w/bx	1.01	2.68	2.01		Disagree	1.01

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45307		Proctosigmoidoscopy fb	0.94	2.89	2.22		Disagree	0.94
45308		Proctosigmoidoscopy removal	0.83	2.68	2.01		Disagree	0.83
45309		Proctosigmoidoscopy removal	2.01	2.89	2.22		Disagree	2.01
45315		Proctosigmoidoscopy removal	1.40	2.89	2.22		Disagree	1.40
45317		Proctosigmoidoscopy bleed	1.50	1.09	1.08		Disagree	1.50
45320		Proctosigmoidoscopy ablate	1.58	3.10	2.43		Disagree	1.58
45321		Proctosigmoidoscopy volvul	1.17	3.25	2.76		Disagree	1.17
45327		Proctosigmoidoscopy w/slent	1.65	4.12	3.63		Disagree	1.65
45330		Diagnostic sigmoidoscopy	0.96	1.10	0.96		Agree	0.96
45378		Diagnostic colonoscopy	3.69	3.69	3.69		Agree	3.69
46040		Incision of rectal abscess	4.95	4.95	4.95		Agree	4.95
46045		Incision of rectal abscess	4.31	5.50	5.50		Agree	5.50
46060		Incision of rectal abscess	5.68	5.68	5.68		Agree	5.68
46270		Removal of anal fistula	3.71	4.50	4.50		Agree	4.50
46275		Removal of anal fistula	4.55	5.00	5.00		Agree	5.00
46280		Removal of anal fistula	5.97	5.97	5.97		Agree	5.97
46285		Removal of anal fistula	4.08	5.00	5.00		Agree	5.00
46600		Diagnostic anoscopy	0.50	0.58	0.49		Disagree	0.50
46604		Anoscopy and dilation	1.31	1.09	1.08		Disagree	1.31
46606		Anoscopy and biopsy	0.81	2.10	1.76		Disagree	0.81
46608		Anoscopy, remove for body	1.51	2.43	1.95		Disagree	1.51
46610		Anoscopy, remove lesion	1.32	2.65	1.95		Disagree	1.32
46611		Anoscopy	1.81	1.09	1.08		Disagree	1.81
46612		Anoscopy, remove lesions	2.34	2.81	2.14		Disagree	2.34
46614		Anoscopy, control bleeding	2.01	1.09	1.08		Disagree	2.01
46615		Anoscopy	2.68	1.20	1.18		Disagree	2.68
46760		Repair of anal sphincter	14.41	WD	(a)		(c)	14.41
46761		Repair of anal sphincter	13.82	WD	(a)		(c)	13.82
46762		Implant artificial sphincter	12.69	WD	(a)		(c)	12.69
47480		Incision of gallbladder	10.80	WD	(a)		(c)	10.80
47490		Incision of gallbladder	7.22	WD	(a)		(c)	7.22
47510		Insert catheter, bile duct	7.82	WD	(a)		(c)	7.82
47511		Insert bile duct drain	10.48	WD	(a)		(c)	10.48
47525		Change bile duct catheter	5.54	WD	(a)		(c)	5.54
47530		Revise/reinsert bile tube	5.84	WD	(a)		(c)	5.84
47562		Laparoscopic cholecystectomy	11.07	11.55	11.07		Agree	11.07
47600		Removal of gallbladder	13.56	17.62	15.88		Disagree/-	14.00
47760		Fuse bile ducts and bowel	25.81	37.50	34.75		Agree	34.75
47765		Fuse liver ducts and bowel	24.84	48.50	48.50		Agree	48.50
47780		Fuse bile ducts and bowel	26.46	40.00	38.75		Agree	38.75
47785		Fuse bile ducts and bowel	31.13	51.00	52.50		Agree	52.50
49000		Exploration of abdomen	11.66	N/A	CPT		CPT	11.66
49002		Reopening of abdomen	10.47	22.35	15.75		Agree	15.75
49010		Exploration behind abdomen	12.26	16.00	15.00		Agree	15.00
49200		Removal of abdominal lesion	10.23	WD	(a)		(c)	10.23
49201		Removal abdom lesion, complex	14.82	WD	(a)		(c)	14.82

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49505		Prp i/hern init reduc >5 yr	7.59	7.86	7.59		Agree	7.59
49906		Free omental flap, microvasc	0.00	WD	(a)		(c)	0.00
50590		Fragmenting of kidney stone	9.08	10.34	9.08		Agree	9.08
51720		Treatment of bladder lesion	1.96	1.96	1.50		Agree	1.50
51798		Us urine capacity measure	0.00	0.38	0.38		Disagree	0.00
52000		Cystoscopy	2.01	2.72	2.23		Agree	2.23
52204		Cystoscopy	2.37	3.08	2.59		Agree	2.59
52601		Prostatectomy (TURP)	12.35	15.50	14.00		Agree	14.00
53445		Insert uro/ves nck sphincter	14.04	WD	(a)		(c)	14.04
54150		Circumcision	1.81	N/A	CPT		CPT	1.81
54152		Circumcision	2.31	N/A	CPT		CPT	2.31
54400		Insert semi-rigid prosthesis	8.98	WD	(a)		(c)	8.98
54405		Insert multi-comp penis pros	13.41	WD	(a)		(c)	13.41
54411		Remv/replc penis pros, comp	15.98	WD	(a)		(c)	15.98
55700		Biopsy of prostate	1.57	2.83	2.58		Agree	2.58
56631		Extensive vulva surgery	16.18	WD	(a)		(c)	16.18
56632		Extensive vulva surgery	20.26	WD	(a)		(c)	20.26
56634		Extensive vulva surgery	17.85	WD	(a)		(c)	17.85
56637		Extensive vulva surgery	21.94	WD	(a)		(c)	21.94
56640		Extensive vulva surgery	22.14	WD	(a)		(c)	22.14
57160		Insert pessary/other device	0.89	1.60	0.89		Agree	0.89
57240		Repair bladder & vagina	6.06	10.90	10.56		Agree	10.56
57250		Repair rectum & vagina	5.52	10.75	10.56		Agree	10.56
57260		Repair vagina	8.26	16.28	13.50		Agree	13.50
57265		Extensive repair of vagina	11.32	19.34	15.00		Agree	15.00
57288		Repair bladder defect	13.00	13.00	13.00		Agree	13.00
57500		Biopsy of cervix	0.97	1.35	1.20		Agree	1.20
57550		Removal of residual cervix	5.52	WD	(a)		(c)	5.52
57555		Remove cervix/repair vagina	8.94	WD	(a)		(c)	8.94
57556		Remove cervix, repair bowel	8.36	WD	(a)		(c)	8.36
58120		Dilation and curettage	3.27	3.27	3.27		Agree	3.27
58150		Total hysterectomy	15.22	18.00	15.98		Agree	15.98
58260		Vaginal hysterectomy	12.96	WD	(a)		(c)	12.96
58720		Removal of ovary/tube(s)	11.34	11.34	11.34		Agree	11.34
60600		Remove carotid body lesion	17.90	24.00	24.00		Agree	24.00
60605		Remove carotid body lesion	20.21	30.50	30.50		Agree	30.50
61154		Pierce skull & remove clot	14.97	14.97	14.97		Agree	14.97
61312		Open skull for drainage	24.53	27.00	27.00		Agree	27.00
61537		Removal of brain tissue	24.96	35.00	35.00		Agree	35.00
61538		Removal of brain tissue	26.77	38.00	38.00		Agree	38.00
61697		Brain aneurysm repr, complx	50.44	61.48	57.31		Agree	57.31
61698		Brain aneurysm repr, complx	48.34	65.00	64.03		Agree	64.03
61700		Brain aneurysm repr, simple	50.44	52.00	46.01		Agree	46.01
61702		Inner skull vessel surgery	48.34	60.00	54.28		Agree	54.28
62270		Spinal fluid tap, diagnostic	1.13	1.65	1.37		Agree	1.37
62350		Implant spinal canal cath	6.86	WD	(a)		(c)	6.86
62351		Implant spinal canal cath	9.99	WD	(a)		(c)	9.99

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62355		Removal spinal canal catheter	5.44	WD	(a)		(c)	5.44
62360		Insert spine infusion device	2.62	WD	(a)		(c)	2.62
62361		Implant spine infusion pump	5.41	WD	(a)		(c)	5.41
62362		Implant spinal infusion pump	7.03	WD	(a)		(c)	7.03
62365		Removal spine infusion device	5.41	WD	(a)		(c)	5.41
63047		Removal of spinal lamina	14.59	14.08	14.08		Agree	14.08
63048		Remove spinal lamina add-on	3.26	3.60	3.55		Disagree	3.26
63075		Neck spine disk surgery	19.38	18.58	18.58		Agree	18.58
63650		Implant neuroelectrodes	6.73	WD	(a)		(c)	6.73
63655		Implant neuroelectrodes	10.27	WD	(a)		(c)	10.27
63660		Revise/remove neuroelectrode	6.15	WD	(a)		(c)	6.15
63685		Insrt/redo spine n generator	7.03	WD	(a)		(c)	7.03
63688		Revise/remove neuroreceiver	5.38	WD	(a)		(c)	5.38
64550		Apply neurostimulator	0.18	WD	(a)		(c)	0.18
64553		Implant neuroelectrodes	2.31	WD	(a)		(c)	2.31
64555		Implant neuroelectrodes	2.27	WD	(a)		(c)	2.27
64560		Implant neuroelectrodes	2.36	WD	(a)		(c)	2.36
64561		Implant neuroelectrodes	6.73	WD	(a)		(c)	6.73
64565		Implant neuroelectrodes	1.76	WD	(a)		(c)	1.76
64573		Implant neuroelectrodes	7.49	WD	(a)		(c)	7.49
64575		Implant neuroelectrodes	4.34	WD	(a)		(c)	4.34
64577		Implant neuroelectrodes	4.61	WD	(a)		(c)	4.61
64580		Implant neuroelectrodes	4.11	WD	(a)		(c)	4.11
64581		Implant neuroelectrodes	13.48	WD	(a)		(c)	13.48
64585		Revise/remove neuroelectrode	2.06	WD	(a)		(c)	2.06
64590		Insrt/redo perph n generator	2.40	WD	(a)		(c)	2.40
64595		Revise/remove neuroreceiver	1.73	WD	(a)		(c)	1.73
64702		Revise finger/toe nerve	4.22	6.00	5.52		Agree	5.52
64721		Carpal tunnel surgery	4.28	5.00	4.28		Agree	4.28
65420		Removal of eye lesion	4.16	WD	(a)		(c)	4.16
65426		Removal of eye lesion	5.24	6.58	5.85		Agree	5.85
65850		Incision of eye	10.50	11.93	11.14		Agree	11.14
65900		Remove eye lesion	10.91	WD	(a)		(c)	10.91
66761		Revision of iris	4.06	4.06	4.06		Agree	4.06
66821		After cataract laser surgery	2.35	3.00	2.78		Agree	2.78
66984		Cataract surg w/iol, 1 stage	10.21	10.21	9.78		Agree	9.78
67038		Strip retinal membrane	21.21	21.21	CPT		CPT	21.21
67221		Ocular photodynamic ther	4.00	4.00	3.45		Agree	3.45
67228		Treatment of retinal lesion	12.72	12.72	CPT		CPT	12.72
67414		Explr/decompress eye socket	11.11	16.82	16.82		Agree	16.82
67445		Explr/decompress eye socket	14.40	18.00	18.00		Agree	18.00
67500		Inject/treat eye socket	0.79	1.44	1.44		Agree	1.44
67505		Inject/treat eye socket	0.82	1.27	1.27		Agree	1.27
67515		Inject/treat eye socket	0.61	1.40	1.40		Agree	1.40
67820		Revise eyelashes	0.89	0.71	0.71		Agree	0.71
67840		Remove eyelid lesion	2.04	2.04	2.04		Agree	2.04
67904		Repair eyelid defect	6.25	7.50	7.50		Agree	7.50

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67911		Revise eyelid defect	5.26	7.30	7.30		Agree	7.30
67917		Repair eyelid defect	6.01	WD	(a)		(c)	6.01
67924		Repair eyelid defect	5.78	WD	(a)		(c)	5.78
67966		Revision of eyelid	6.56	8.50	8.50		Agree	8.50
68750		Create tear duct drain	8.65	WD	(a)		(c)	8.65
68840		Explore/irrigate tear ducts	1.25	1.25	1.25		Agree	1.25
69210		Remove impacted ear wax	0.61	0.82	0.61		Agree	0.61
70355		Panoramic x-ray of jaws	0.20	0.22	0.20		Agree	0.20
71010		Chest x-ray	0.18	0.18	0.18		Agree	0.18
71020		Chest x-ray	0.22	0.22	0.22		Agree	0.22
71260		Ct thorax w/dye	1.24	1.30	1.24		Agree	1.24
72192		Ct pelvis w/o dye	1.09	1.11	1.09		Agree	1.09
72193		Ct pelvis w/dye	1.16	1.20	1.16		Agree	1.16
73100		X-ray exam of wrist	0.16	0.16	0.16		Agree	0.16
73110		X-ray exam of wrist	0.17	0.17	0.17		Agree	0.17
73120		X-ray exam of hand	0.16	0.16	0.16		Agree	0.16
73130		X-ray exam of hand	0.17	0.17	0.17		Agree	0.17
73140		X-ray exam of finger(s)	0.13	0.13	0.13		Agree	0.13
74000		X-ray exam of abdomen	0.18	0.18	0.18		Agree	0.18
74020		X-ray exam of abdomen	0.27	0.27	0.27		Agree	0.27
74022		X-ray exam series, abdomen	0.32	0.32	0.32		Agree	0.32
74150		Ct abdomen w/o dye	1.19	1.23	1.19		Agree	1.19
74160		Ct abdomen w/dye	1.27	1.35	1.27		Agree	1.27
75552		Heart mri for morph w/o dye	1.60	2.23	CPT		CPT	1.60
75553		Heart mri for morph w dye	2.00	2.75	CPT		CPT	2.00
75554		Cardiac MRI/function	1.83	2.63	CPT		CPT	1.83
75555		Cardiac MRI/limited study	1.74	2.00	CPT		CPT	1.74
76075		Dxa bone density, axial	0.30	0.30	0.20		Agree	0.20
76519		Echo exam of eye	0.54	0.54	0.54		Agree	0.54
76700		Us exam, abdom, complete	0.81	0.81	0.81		Agree	0.81
76830		Transvaginal us, non-ob	0.69	0.69	0.69		Agree	0.69
77263		Radiation therapy planning	3.14	3.14	3.14		Agree	3.14
77280		Set radiation therapy field	0.70	0.70	0.70		Agree	0.70
77290		Set radiation therapy field	1.56	1.56	1.56		Agree	1.56
77300		Radiation therapy dose plan	0.62	0.62	0.62		Agree	0.62
77315		Teletx isodose plan complex	1.56	1.56	1.56		Agree	1.56
77331		Special radiation dosimetry	0.87	0.87	0.87		Agree	0.87
77334		Radiation treatment aid(s)	1.24	1.24	1.24		Agree	1.24
77470		Special radiation treatment	2.09	2.09	2.09		Agree	2.09
78306		Bone imaging, whole body	0.86	0.86	0.86		Agree	0.86
78315		Bone imaging, 3 phase	1.02	1.02	1.02		Agree	1.02
78465		Heart image (3d), multiple	1.46	1.46	1.46		Agree	1.46
78478		Heart wall motion add-on	0.62	0.62	0.50		Agree	0.50
78480		Heart function add-on	0.62	0.62	0.30		Agree	0.30
88309		Tissue exam by pathologist	2.28	3.00	2.80		Agree	2.80
88321		Microslide consultation	1.30	2.00	1.63		Agree	1.63
88323		Microslide consultation	1.35	2.31	1.83		Agree	1.83

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88325		Comprehensive review of data	2.22	2.93	2.50		Agree	2.50
90465		Immune admin 1 inj, < 8 yrs	0.17	N/A	CPT		CPT	0.17
90466		Immune admin addl inj, < 8 y	0.15	N/A	CPT		CPT	0.15
90467		Immune admin o or n, < 8 yrs	0.00	N/A	CPT		CPT	0.00
90468		Immune admin o/n, addl , < 8 y	0.00	N/A	CPT		CPT	0.00
90473		Immune admin oral/nasal	0.00	WD	(a)		(c)	0.00
90474		Immune admin oral/nasal addl	0.00	WD	(a)		(c)	0.00
92083		Visual field examination(s)	0.50	0.60	0.50		Agree	0.50
92226		Special eye exam, subsequent	0.33	0.33	0.33		Agree	0.33
92235		Eye exam with photos	0.81	0.81	0.81		Agree	0.81
92250		Eye exam with photos	0.44	0.44	0.44		Agree	0.44
92506		Speech/hearing evaluation	0.86	WD	(a)		(c)	0.86
92507		Speech/hearing therapy	0.52	WD	(a)		(c)	0.52
92508		Speech/hearing therapy	0.26	WD	(a)		(c)	0.26
92510		Rehab for ear implant	1.50	WD	(a)		(c)	1.50
92516		Facial nerve function test	0.43	WD	(a)		(c)	0.43
92520		Laryngeal function studies	0.76	WD	(a)		(c)	0.76
92526		Oral function therapy	0.55	WD	(a)		(c)	0.55
92541		Spontaneous nystagmus test	0.40	WD	(a)		(c)	0.40
92542		Positional nystagmus test	0.33	WD	(a)		(c)	0.33
92543		Caloric vestibular test	0.10	WD	(a)		(c)	0.10
92544		Optokinetic nystagmus test	0.26	WD	(a)		(c)	0.26
92545		Oscillating tracking test	0.23	WD	(a)		(c)	0.23
92546		Sinusoidal tracking test	0.29	WD	(a)		(c)	0.29
92547		Supplemental electrical test	0.00	WD	(a)		(c)	0.00
92548		Posturography	0.50	WD	(a)		(c)	0.50
92551		Pure tone hearing test, air	0.00	WD	(a)		(c)	0.00
92552		Pure tone audiometry, air	0.00	WD	(a)		(c)	0.00
92553		Audiometry, air & bone	0.00	WD	(a)		(c)	0.00
92555		Speech threshold audiometry	0.00	WD	(a)		(c)	0.00
92556		Speech threshold, complete	0.00	WD	(a)		(c)	0.00
92557		Comprehensive hearing test	0.00	WD	(a)		(c)	0.00
92559		Group audiometric testing	0.00	WD	(a)		(c)	0.00
92560		Bekesy audiometry, screen	0.00	WD	(a)		(c)	0.00
92561		Bekesy audiometry, diagnosis	0.00	WD	(a)		(c)	0.00
92562		Loudness balance test	0.00	WD	(a)		(c)	0.00
92563		Tone decay hearing test	0.00	WD	(a)		(c)	0.00
92564		Sisi hearing test	0.00	WD	(a)		(c)	0.00
92565		Stenger test, pure tone	0.00	WD	(a)		(c)	0.00
92567		Tympanometry	0.00	WD	(a)		(c)	0.00
92568		Acoustic reflex testing	0.00	WD	(a)		(c)	0.00
92569		Acoustic reflex decay test	0.00	WD	(a)		(c)	0.00
92571		Filtered speech hearing test	0.00	WD	(a)		(c)	0.00
92572		Staggered spondaic word test	0.00	WD	(a)		(c)	0.00
92573		Lombard test	0.00	WD	(a)		(c)	0.00
92575		Sensorineural acuity test	0.00	WD	(a)		(c)	0.00
92576		Synthetic sentence test	0.00	WD	(a)		(c)	0.00

CPT/ HCPCS Code	Mod	Descriptor	2005 Work RVU	Requested Work RVU	RUC REC	HCPAC REC	CMS Proposal	Proposed Work RVU
92579		Visual audiometry (vra)	0.00	WD	(a)		(c)	0.00
92582		Conditioning play audiometry	0.00	WD	(a)		(c)	0.00
92583		Select picture audiometry	0.00	WD	(a)		(c)	0.00
92584		Electrocochleography	0.00	WD	(a)		(c)	0.00
92585		Auditor evoke potent, compre	0.50	WD	(a)		(c)	0.50
92586		Auditor evoke potent, limit	0.00	WD	(a)		(c)	0.00
92587		Evoked auditory test	0.13	WD	(a)		(c)	0.13
92588		Evoked auditory test	0.36	WD	(a)		(c)	0.36
92596		Ear protector evaluation	0.00	WD	(a)		(c)	0.00
92597		Oral speech device eval	0.86	WD	(a)		(c)	0.86
92601		Cochlear implt f/up exam < 7	0.00	WD	(a)		(c)	0.00
92602		Reprogram cochlear implt <7	0.00	WD	(a)		(c)	0.00
92603		Cochlear implt f/up exam 7>	0.00	WD	(a)		(c)	0.00
92604		Reprogram cochlear implt 7 >	0.00	WD	(a)		(c)	0.00
92605		Eval for nonspeech device rx	0.00	WD	(a)		(c)	0.00
92606		Non-speech device service	0.00	WD	(a)		(c)	0.00
92607		Ex for speech device. rx, 1 hr	0.00	WD	(a)		(c)	0.00
92608		Ex for speech device rx, addl	0.00	WD	(a)		(c)	0.00
92609		Use of speech device service	0.00	WD	(a)		(c)	0.00
92610		Evaluate swallowing function	0.00	WD	(a)		(c)	0.00
92611		Motion fluoroscopy/swallow	0.00	WD	(a)		(c)	0.00
92612		Endoscopy swallow tst (fees)	1.27	WD	(a)		(c)	1.27
92614		Laryngoscopic sensory test	1.27	WD	(a)		(c)	1.27
92616		Fees w/laryngeal sense test	1.88	WD	(a)		(c)	1.88
92620		Auditory functon, 60 min	0.00	WD	(a)		(c)	0.00
92621		Auditory function, + 15 min	0.00	WD	(a)		(c)	0.00
92625		Tinnitus assessment	0.00	WD	(a)		(c)	0.00
93010		Electrocardiogram report	0.17	0.24	0.17		Agree	0.17
93015		Cardiovascular stress test	0.75	1.00	0.75		Agree	0.75
93018		Cardiovascular stress test	0.30	0.60	0.30		Agree	0.30
93325		Doppler color flow add-on	0.07	0.30	CPT		CPT	0.07
94010		Breathing capacity test	0.17	0.17	0.17		Agree	0.17
94657		Continued ventilator mgmt	0.83	1.37	CPT		CPT	0.83
95004		Percut allergy skin lests	0.00	0.03	CPT		CPT	0.00
95024		Id allergy test, drug/bug	0.00	0.04	CPT		CPT	0.00
95027		Id allergy litrate-airborne	0.00	0.03	CPT		CPT	0.00
95115		Immunotherapy, one injection	0.00	WD	(a)		(c)	0.00
95117		Immunotherapy injections	0.00	WD	(a)		(c)	0.00
95144		Antigen therapy services	0.06	0.12	0.06		Agree	0.06
95165		Antigen therapy services	0.06	0.12	0.06		Agree	0.06
95816		Eeg, awake and drowsy	1.08	1.08	1.08		Agree	1.08
95819		Eeg, awake and asleep	1.08	1.29	1.08		Agree	1.08
95861		Muscle test, 2 limbs	1.54	1.68	1.54		Agree	1.54
95872		Muscle test, one fiber	1.50	3.00	3.00		Disagree/-	2.00
95900		Motor nerve conduction test	0.42	0.55	0.42		Agree	0.42
95904		Sense nerve conduction test	0.34	0.55	0.34		Agree	0.34
95925		Somatosensory testing	0.54	0.79	0.54		Agree	0.54

CPT/ HCPCS Code	Mod	Descriptor	2005 Work RVU	Requested Work RVU	RUC REC	HCPAC REC	CMS Proposal	Proposed Work RVU
95926		Somatosensory testing	0.54	0.79	0.54		Agree	0.54
95927		Somatosensory testing	0.54	1.00	0.54		Agree	0.54
95953		EEG monitoring/computer	3.08	3.50	3.30		Agree	3.30
96105		Assessment of aphasia	0.00	WD	----------	(a)	(c)	0.00
96567		Photodynamic tx, skin	0.00	WD	(a)		(c)	0.00
97802		Medical nutrition, indiv. in	0.00	N/A	CPT		CPT	0.00
97803		Med nutrition, indiv, subseq	0.00	N/A	CPT		CPT	0.00
97804		Medical nutrition, group	0.00	N/A	CPT		CPT	0.00
99201		Office/outpatient visit, new	0.45	0.45	0.45		Agree	0.45
99202		Office/outpatient visit, new	0.88	0.88	0.88		Agree	0.88
99203		Office/outpatient visit, new	1.34	1.92	1.34		Agree	1.34
99204		Office/outpatient visit, new	2.00	2.78	2.30		Agree	2.30
99205		Office/outpatient visit, new	2.67	3.78	3.00		Agree	3.00
99211		Office/outpatient visit, est	0.17	0.17	0.17		Agree	0.17
99212		Office/outpatient visit, est	0.45	0.62	0.45		Agree	0.45
99213		Office/outpatient visit, est	0.67	1.40	0.92		Agree	0.92
99214		Office/outpatient visit, est	1.10	2.00	1.42		Agree	1.42
99215		Office/outpatient visit, est	1.77	2.70	2.00		Agree	2.00
99221		Initial hospital care	1.28	2.56	1.88		Agree	1.88
99222		Initial hospital care	2.14	3.43	2.56		Agree	2.56
99223		Initial hospital care	2.99	4.26	3.78		Agree	3.78
99231		Subsequent hospital care	0.64	1.00	0.76		Agree	0.76
99232		Subsequent hospital care	1.06	2.02	1.39		Agree	1.39
99233		Subsequent hospital care	1.51	3.03	2.00		Agree	2.00
99238		Hospital discharge day	1.28	1.50	1.28		Agree	1.28
99239		Hospital discharge day	1.75	2.30	1.90		Agree	1.90
99241		Office consultation	0.64	1.00	0.64		Agree	0.64
99242		Office consultation	1.29	1.58	1.34		Agree	1.34
99243		Office consultation	1.72	2.01	1.88		Agree	1.88
99244		Office consultation	2.58	3.02	3.02		Agree	3.02
99245		Office consultation	3.42	4.00	3.77		Agree	3.77
99251		Initial inpatient consult	0.66	1.15	1.00		Agree	1.00
99252		Initial inpatient consult	1.32	1.81	1.50		Agree	1.50
99253		Initial inpatient consult	1.82	2.50	2.27		Agree	2.27
99254		Initial inpatient consult	2.64	3.50	3.29		Agree	3.29
99255		Initial inpatient consult	3.64	4.50	4.00		Agree	4.00
99281		Emergency dept visit	0.33	0.50	0.45		Agree	0.45
99282		Emergency dept visit	0.55	1.00	0.88		Agree	0.88
99283		Emergency dept visit	1.24	2.00	1.34		Agree	1.34
99284		Emergency dept visit	1.95	3.14	2.56		Agree	2.56
99285		Emergency dept visit	3.06	4.19	3.80		Agree	3.80
99291		Critical care, first hour	3.99	5.10	4.50		Agree	4.50
99292		Critical care, addl 30 min	2.00	2.66	2.25		Agree	2.25
99301		Nursing facility Care	1.20	N/A	CPT		CPT	**
99302		Nursing facility Care	1.61	N/A	CPT		CPT	**
99303		Nursing facility Care	2.01	N/A	CPT		CPT	**
99311		Nursing fac care, subseq	0.60	N/A	CPT		CPT	**
99312		Nursing fac care, subseq	1.00	N/A	CPT		CPT	**
99313		Nursing fac care, subseq	1.42	N/A	CPT		CPT	**
99321		Rest home visit, new patient	0.71	N/A	CPT		CPT	**
99322		Rest home visit, new patient	1.01	N/A	CPT		CPT	**
99323		Rest home visit, new patient	1.28	N/A	CPT		CPT	**
99331		Rest home visit, est patient	0.60	N/A	CPT		CPT	**
99332		Rest home visit, est patient	0.80	N/A	CPT		CPT	**
99333		Rest home visit, est patient	1.00	N/A	CPT		CPT	**
G0270		MNT subs tx for change dx	0.00	N/A	CPT		CPT	0.00
G0271		Group MNT 2 or more 30 mins	0.00	N/A	CPT		CPT	0.00

[1]All CPT codes and descriptors copyright 2005 American Medical Association

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B. Discussion of Comments by Clinical Area

1. Dermatology and Plastic Surgery

[If you choose to comment on issues in this section, please include the caption ''DISCUSSION OF COMMENTS–DERMATOLOGY AND PLASTIC SURGERY'' at the beginning of your comments.]

a. Hidradenitis

The American Society of Plastic Surgeons (ASPS) submitted the hidradenitis services (CPT codes 11450, 11451, 11462, 11463, 11470 and 11471) as undervalued but, based on the very low response rate to the survey they conducted the ASPS withdrew these codes from the 5-Year Review.

b. Craniofacial Surgery

The ASPS originally requested that 10 craniofacial reconstruction and fracture codes be reviewed. ASPS conducted a standard RUC survey for these services and, based on the low survey response rate, withdrew the following six CPT codes from the 5-Year Review: 21365, 21366, 21432, 21435, 21436, and 21470. ASPS presented survey data for the remaining four CPT codes listed in Table 2 to the RUC indicating there is compelling evidence that these codes had been valued based on an incorrect assumption regarding the value of the bone graft portion of each service.

TABLE 2

CPT code	Descriptor
21145	Reconstruction midface, LeFort I; single piece, segment movement in any direction, requiring bone grafts (includes obtaining autografts).
21146	Reconstruction midface, LeFort I; two pieces, segment movement in any direction, requiring bone grafts (includes obtaining autografts) (e.g., ungrafted unilateral alveolar cleft).
21147	Reconstruction midface, LeFort I; three or more pieces, segment movement in any direction, requiring bone grafts (includes obtaining autografts) (e.g., ungrafted bilateral alveolar cleft or multiple osteotomies).
21395	Open treatment of orbital floor blowout fracture; periorbital approach with bone graft (includes obtaining graft).

RUC Recommendations

The RUC agreed that the appropriate increment of work for the bone graft should be 50 percent of CPT code 20902, *Bone graft, any donor area; major or large* (7.54 work RVUs × 50 percent = 3.77 work RVUs). The RUC recommended that this increment of 3.77 be used and added to the base code for each of these services.

The RUC-recommended work RVUs for these CPT codes are as follows: 21145 = 21.84 work RVUs; 21146 = 22.55 work RVUs, 21147 = 23.32 work RVUs; and 21395 = 13.88 work RVUs.

CMS Proposed Valuation

We agree with the RUC recommendations for craniofacial surgery services.

c. Other Plastic Surgery Services

ASPS initially submitted five additional services for review (see Table 3). However, the specialty society was unable to obtain an adequate survey response rate for these codes and withdrew them from the RUC review. In addition, the RUC recommended that CPT code 15831 should be referred to the CPT Editorial Panel for review to capture the new population of patients using this service.

TABLE 3

CPT code	Descriptor
11960	Insertion of tissue expander(s) for other than breast, including subsequent expansion.
15831	Excision, excessive skin and subcutaneous tissue (including lipectomy); abdomen (abdominoplasty).
19361	Breast reconstruction with latissimus dorsi flap, with or without prosthetic implant.
43496	Free jejunum transfer with microvascular anastomosis.
49906	Free omental flap with microvascular anastomosis.

We submitted four plastic surgery services for the 5-Year Review as services that had never been reviewed by the RUC (see Table 4). In addition, CPT code 15732 was submitted as it had been valued as an inpatient service and it is now performed as an outpatient service.

TABLE 4

CPT code	Descriptor
15100	Split-thickness autograft, trunk, arms, legs; first 100 sq cm or less, or one percent of body area of infants and children (except 15050).
15240	Full thickness graft, free, including direct closure of donor site, forehead, cheeks, chin, mouth, neck, axillae, genitalia, hands, and/or feet; 20 sq cm or less.
15732	Muscle, myocutaneous, or fasciocutaneous flap; head and neck (e.g., temporalis, masseter muscle, sternocleidomastoid, levator scapulae).
15734	Muscle, myocutaneous, or fasciocutaneous flap; trunk.

RUC Recommendations

The RUC was convinced that the survey data validated the current valuation of CPT codes 15100, 15240, and 15734. The RUC recommended that the current work RVUs be maintained for these CPT codes as follows: 15100 = 9.04 work RVUs; 15240 = 9.03 work RVUs; and 15734 = 17.76 work RVUs. The RUC reviewed and discussed the issue concerning the change in setting from inpatient to outpatient for CPT code 15732 and determined that this code describes two disparate procedures; therefore, the RUC recommended that this CPT code be forwarded to the CPT Editorial Panel for review.

CMS Proposed Valuation

We agree with the RUC recommendations for these plastic surgery services.

d. Other Dermatology Services

The American Academy of Dermatology (AAD) and a pharmaceutical company submitted CPT code 96567, *Photodynamic therapy by external application of light to destroy premalignant and/or malignant lesions of the skin and adjacent mucosa (e.g., lip) by activation of photosensitive drug(s), each phototherapy exposure session,* for the 5-Year Review but, subsequent to discussions with the RUC regarding the need for potential CPT revisions, withdrew the code from the 5-Year Review.

We submitted the CPT codes for integumentary services in Table 5 for review because they had never been previously reviewed by the RUC.

TABLE 5

CPT code	Descriptor
11100	Biopsy of skin, subcutaneous tissue and/or mucous membrane (including simple closure), unless otherwise listed; single lesion.
12052	Layer closure of wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 2.6 cm to 5.0 cm.
13121	Repair, complex, scalp, arms, and/or legs; 2.6 cm to 7.5 cm.
14040	Adjacent tissue transfer or rearrangement, forehead, cheeks, chin, mouth, neck, axillae, genitalia, hands and/or feet; defect 10 sq cm or less.
14060	Adjacent tissue transfer or rearrangement, eyelids, nose, ears and/or lips; defect 10 sq cm or less.
17003	Destruction (e.g., laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), all benign or premalignant lesions (e.g., actinic keratoses) other than skin tags or cutaneous vascular proliferative lesions; second through 14 lesions, each (List separately in addition to code for first lesion).
17262	Destruction, malignant lesion (e.g., laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), trunk, arms or legs; lesion diameter 1.1 to 2.0 cm.
17281	Destruction, malignant lesion (e.g., laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), face, ears, eyelids, nose, lips, mucous membrane; lesion diameter 0.6 to 1.0 cm.

We requested that CPT code 17003 be reviewed because we believe that advances in technology have likely resulted in a modification to the physician work required to accomplish the procedure. In discussions at the RUC meeting, we noted that new Medicare coverage policies related to actinic keratoses (AK) have increased the reporting of this service to describe cryosurgical destruction of AK. Standard RUC surveys were conducted for all of these services.

RUC Recommendations

Based on a review of the survey data, the RUC was convinced that the survey data validated the current valuation of the following services and recommended the work RVUs for these CPT codes be maintained as follows: 11100 = 0.81 work RVUs; 12052 = 2.77 work RVUs; 13121 = 4.32 work RVUs; 14040 = 7.86 work RVUs; 14060 = 8.49 work RVUs; 17262 = 1.58 work RVUs; and 17281 = 1.72 work RVUs.

For CPT code 17003, the RUC reviewed previous and current survey data and agreed that the application of cryosurgery to each lesion requires no more than two minutes of physician time. Therefore, the RUC recommended a work RVU of 0.07 for CPT code 17003. The RUC determined that the revision to the work RVUs for CPT code 17003 created a rank order anomaly in this family of codes. In addition to referring codes in this family to the CPT Editorial Panel to clarify the code descriptors, the RUC in February 2006 also recommended a change to the work RVUs for CPT code 17004, *Destruction (e.g., laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), all benign or premalignant lesions (e.g., actinic keratoses) other than skin tags or cutaneous vascular proliferative lesions; 15 or more lesions.* This was based on the understanding that when rank order anomalies were identified, the specialty could bring these additional codes forward for consideration for re-evaluation under the 5-Year Review at the next RUC meeting (that is, February 2006).

A standard RUC survey was conducted for this code and based on the survey responses, the specialty society recommended a change in the intra-service work descriptions to reflect a greater time based on their belief that the destruction of premalignant lesions requires more time than benign lesions. Thus, the intra-service period for CPT code 17004 was changed to 20 minutes which is twice as much as the time associated with the destruction of benign lesion in CPT code 17111, *Destruction (e.g., laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), of flat warts, molluscum contagiosum, or milia; 15 or more lesions,* of 10 minutes. The RUC agreed to this time change and recommended work RVUs of 1.80 for CPT code 17004.

CMS Proposed Valuation

We are in agreement with the RUC-recommended work RVUs for these services with the exception of CPT code 17004. For CPT code 17004, we believe that the work associated with benign and premalignant lesions is comparable and, therefore, the work RVUs for CPT code 17004 should be more similar to that of CPT code 17111, which is 0.92. Based on our proposed valuation of 17003 (the code used for 2–14 lesions), of 0.07 work RVUs, the 14th lesion would equal 0.91 work RVUs (0.07×13 lesions) plus 0.6 work RVUs for the initial lesion, that is, base code CPT code 17000, which is billed once in conjunction with 17003. We are proposing to value CPT code 17004, for 15 or more lesions, at 1.58 work RVUs by adding the 0.07 work RVU increment of 17003 and the 0.6 work RVUs for the base code, CPT code 17000, which is not billed in conjunction with CPT code 17004.

e. Mohs Surgery

We referred the Mohs surgery codes for review because this family of services has never been surveyed and reviewed by the RUC (see Table 6).

TABLE 6

CPT code	Descriptor
17304	Chemosurgery (Mohs micrographic technique), including removal of all gross tumor, surgical excision of tissue specimens, mapping, color coding of specimens, microscopic examination of specimens by the surgeon, and complete histopathologic preparation including the first routine stain (e.g., hematoxylin and eosin, toluidine blue); first stage, fresh tissue technique, up to 5 specimens.
17305	Chemosurgery (Mohs micrographic technique), including removal of all gross tumor, surgical excision of tissue specimens, mapping, color coding of specimens, microscopic examination of specimens by the surgeon, and complete histopathologic preparation including the first routine stain (e.g., hematoxylin and eosin, toluidine blue); second stage, fixed or fresh tissue, up to 5 specimens).

The specialty society conducted surveys to collect data for these two codes. The workgroup then reviewed the history of these services, including the fact that the nomenclature for these services is not consistent with other integumentary coding conventions in CPT and that the RUC had previously indicated that the specialty society should work with the CPT Editorial Panel to redefine these services.

RUC Recommendations

The RUC recommended that these CPT codes be referred to the CPT Editorial Panel.

CMS Proposed Valuation

We will maintain the current valuation for these services pending the results of the review of the CPT Editorial Panel.

f. Excision of Lesions

We submitted all of the excision of lesion codes for review, noting that these services should be surveyed and reviewed by the RUC (see Table 7—benign: CPT codes 11400 through 11446, and malignant: CPT codes 11600 through 11646).

The work RVUs for the codes predominantly performed by the surgical specialties (CPT codes representing services to excise larger lesions) were all valued, with the exception of two CPT codes, by acceptable RUC surveys. However, there were no acceptable RUC surveys for the 18 services predominantly performed by the dermatologists (CPT codes representing services to excise smaller lesions) due to incomplete surveys and low response rates.

RUC Recommendations

The RUC agreed that the primary difference in the work between the family of codes for excision of benign lesions versus those codes for excision of malignant lesions (see Table 7) is in the pre-evaluation time (that is, additional planning, and discussions with the patient), the intensity of the intra-service time, and the level of post-operative visit.

The workgroup used the RUC surveys to determine the work RVUs for those services performed by the surgeons and then applied the building-block approach using the IWPUT values of the codes primarily performed by the surgical specialties to derive IWPUT values and corresponding work RVUs for the CPT codes primarily performed by dermatology. (The IWPUT is derived by dividing the intra-service work by the intra-service time, and is used to measure the relative intensity of the work between services.)

As a result of the application of the building-block methodology to the codes without RUC acceptable surveys, the RUC recommended that 24 codes retain their current work RVUs, 5 codes have decreased work RVUs, and 7 codes have increased work RVUs. The specific RUC recommendations for these CPT codes are presented in Table 7.

TABLE 7:

BENIGN				MALIGNANT		
CPT CODE	Descriptor	RUC recommended WORK RVU		CPT CODE	Descriptor	RUC recommended WORK RVU
11400	Excision, benign Lesion including margins, except skin tag (unless listed elsewhere), trunk, arms or legs; excised diameter 0.5 cm or less	0.85		11600	Excision, malignant lesion including margins, trunk, arms, or legs; excised diameter 0.5 cm or less	1.31
11401	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), trunk, arms or legs; excised diameter 0.6 to 1.0 cm	1.23		11601	Excision, malignant lesion including margins, trunk, arms, or legs; excised diameter 0.6 to 1.0 cm	1.75
11402	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), trunk, arms or legs; excised diameter 1.1 to 2.0 cm	1.40		11602	Excision, malignant lesion including margins, trunk, arms, or legs; excised diameter 1.1 to 2.0 cm	1.95
11403	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), trunk, arms or legs; excised diameter 2.1 to 3.0 cm	1.79		11603	Excision, malignant lesion including margins, trunk, arms, or legs; excised diameter 2.1 to 3.0 cm	2.50
11404	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), trunk, arms or legs; excised diameter 3.1 to 4.0 cm	2.06		11604	Excision, malignant lesion including margins, trunk, arms, or legs; excised diameter 3.1 to 4.0 cm	2.85
11406	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), trunk, arms or legs; excised diameter over 4.0 cm	3.20		11606	Excision, malignant lesion including margins, trunk, arms, or legs; excised diameter over 4.0 cm	4.70

BENIGN				MALIGNANT		
CPT CODE	Descriptor	RUC recommended WORK RVU		CPT CODE	Descriptor	RUC recommended WORK RVU
11420	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; excised diameter 0.5 cm or less	0.98		11620	Excision, malignant lesion including margins, scalp, neck, feet, genitalia; excised diameter 0.5 cm or less	1.32
11421	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; excised diameter 0.6 to 1.0 cm	1.42		11621	Excision, malignant lesion including margins, scalp, neck, feet, genitalia; excised diameter 0.6 to 1.0 cm	1.76
11422	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; excised diameter 1.1 to 2.0 cm	1.63		11622	Excision, malignant lesion including margins, scalp, neck, feet, genitalia; excised diameter 1.1 to 2.0 cm	2.09
11423	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; excised diameter 2.1 to 3.0 cm	2.01		11623	Excision, malignant lesion including margins, scalp, neck, feet, genitalia; excised diameter 2.1 to 3.0 cm	2.79
11424	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; excised diameter 3.1 to 4.0 cm	2.43		11624	Excision, malignant lesion including margins, scalp, neck, feet, genitalia; excised diameter 3.1 to 4.0 cm	3.30

BENIGN				MALIGNANT		
CPT CODE	Descriptor	RUC recommended WORK RVU		CPT CODE	Descriptor	RUC recommended WORK RVU
11426	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; excised diameter over 4.0 cm	3.77		11626	Excision, malignant lesion including margins, scalp, neck, feet, genitalia; excised diameter over 4.0 cm	4.29
11440	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), face, ears, eyelids, nose, lips, mucous membrane; excised diameter 0.5 cm or less	1.00		11640	Excision, malignant lesion including margins, face, ears, eyelids, nose, lips; excised diameter 0.5 cm or less	1.35
11441	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), face, ears, eyelids, nose, lips, mucous membrane; excised diameter 0.6 to 1.0 cm	1.48		11641	Excision, malignant lesion including margins, face, ears, eyelids, nose, lips; excised diameter 0.6 to 1.0 cm	1.85
11442	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), face, ears, eyelids, nose, lips, mucous membrane; excised diameter 1.1 to 2.0 cm	1.72		11642	Excision, malignant lesion including margins, face, ears, eyelids, nose, lips; excised diameter 1.1 to 2.0 cm	2.30
11443	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), face, ears, eyelids, nose, lips, mucous membrane; excised diameter 2.1 to 3.0 cm	2.29		11643	Excision, malignant lesion including margins, face, ears, eyelids, nose, lips; excised diameter 2.1 to 3.0 cm	3.10

BENIGN				MALIGNANT		
CPT CODE	Descriptor	RUC recommended WORK RVU		CPT CODE	Descriptor	RUC recommended WORK RVU
11444	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), face, ears, eyelids, nose, lips, mucous membrane; excised diameter 3.1 to 4.0 cm	3.14		11644	Excision, malignant lesion including margins, face, ears, eyelids, nose, lips; excised diameter 3.1 to 4.0 cm	4.02
11446	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), face, ears, eyelids, nose, lips, mucous membrane; excised diameter over 4.0 cm	4.48		11646	Excision, malignant lesion including margins, face, ears, eyelids, nose, lips; excised diameter over 4 cm	5.94

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CMS Proposed Valuation

We are in agreement with the RUC recommendations for the excision of lesions services.

2. Orthopedic Surgery

[If you choose to comment on issues in this section, please include the caption ''DISCUSSION OF COMMENTS—ORTHOPEDIC SURGERY'' at the beginning of your comments.]

a. Tumor Procedures

The American Academy of Orthopaedic Surgeons (AAOS) submitted CPT codes in the following three families of tumor procedures for review. (See Table 8, Table 9, and Table 10.)

TABLE 8.—FAMILY 1—EXCISION OF DEEP SOFT TISSUE MASS

CPT code	Description
21556	Excision tumor, soft tissue of neck or thorax; deep, subfascial, intramuscular
23076	Excision, soft tissue tumor, shoulder area; deep, subfascial, or intramuscular.
24076	Excision, tumor, soft tissue of upper arm or elbow area; deep (subfascial or intramuscular).
25076	Excision, tumor, soft tissue of forearm and/or wrist area; deep (subfascial or intramuscular).
27048	Excision, tumor, pelvis and hip area; deep, subfascial, intramuscular.
27328	Excision, tumor, thigh or knee area, deep, subfascial, or intramuscular.
27619	Excision, tumor, leg or ankle area; deep (subfascial or intramuscular).
28045	Excision, tumor, foot; deep, subfascial, intramuscular.

TABLE 9.—FAMILY 2—RADICAL RESECTION OF SOFT TISSUE SARCOMA

CPT code	Description
24077	Radical resection of tumor (e.g., malignant neoplasm), soft tissue of upper arm or elbow area.
25077	Radical resection of tumor (e.g., malignant neoplasm), soft tissue of forearm and/or wrist area.
27049	Radical resection of tumor, soft tissue of pelvis and hip area (e.g., malignant neoplasm).
27329	Radical resection of tumor (e.g., malignant neoplasm), soft tissue of thigh or knee area.
27615	Radical resection of tumor (e.g., malignant neoplasm), soft tissue of leg or ankle area).

TABLE 10.—FAMILY 3—RADICAL RESECTION OF BONE SARCOMA

CPT code	Description
21935	Radical resection of tumor (e.g., malignant neoplasm), soft tissue of back or flank.
23200	Radical resection for tumor; clavicle.
23210	Radical resection for tumor; scapula.
23220	Radical resection of bone tumor, proximal humerus.
24150	Radical resection for tumor, shaft or distal humerus.
24151	Radical resection for tumor, shaft or distal humerus; with autograft (includes obtaining graft).

TABLE 10.—FAMILY 3—RADICAL RESECTION OF BONE SARCOMA—Continued

CPT code	Description
24152	Radical resection for tumor, radial head or neck.
24153	Radical resection for tumor, radial head or neck; with autograft (includes obtaining graft).
25170	Radical resection for tumor, radius or ulna.
27076	Radical resection of tumor or infection; ilium, including acetabulum, both pubic rami, or ischium and acetabulum.
27078	Radical resection of tumor or infection; ischial tuberosity and greater trochanter of femur.
27365	Radical resection of tumor, bone, femur or knee.
27645	Radical resection of tumor, bone; tibia.
27646	Radical resection of tumor, bone; fibula.
27647	Radical resection of tumor; talus or calcaneus.

The specialty subsequently withdrew CPT codes 21935, 24151, and 24153 from the 5-Year Review. A minisurvey methodology was used for all three families of codes.

RUC Recommendations

Based on a review of the survey results for the codes in Families 1 and 2, the RUC recommended referring these codes to the CPT Editorial Panel for clarification. The RUC indicated that the survey data from the specialty society described a hospitalized patient as the typical patient. However, our data indicates that the typical patient is not hospitalized and that this inconsistency could be the result of ambiguous CPT descriptors.

For the services in Family 3, the RUC discussion focused on the issue of whether there may also be different patient populations covered by each of these codes.

The RUC also recommended referring the codes in Family 3 to the CPT Editorial Panel for clarification.

CMS Proposed Valuation

We will maintain the current valuation for these services pending the results of the review by the CPT Editorial Panel.

b. Trauma Procedures

The AAOS submitted the following trauma procedure codes for review (see Table 11). Standard RUC surveys of these services were conducted.

TABLE 11

CPT code	Description
20680	Removal of implant; deep (e.g., buried wire, pin, screw, metal band, nail, rod or plate).
20692	Application of a multiplane (pins or wires in more than one plane), unilateral, external fixation system (e.g., Ilizarov, Monticelli type).
24430	Repair of nonunion or malunion, humerus; without graft (e.g., compression technique).
27465	Osteoplasty, femur; shortening (excluding 64876).
27470	Repair, nonunion or malunion, femur, distal to head and neck; without graft (e.g., compression technique).
27472	Repair, nonunion or malunion, femur, distal to head and neck; with iliac or other autogeneous bone graft (includes obtaining graft).
27709	Osteotomy; tibia and fibula.
27720	Repair of nonunion or malunion, tibia; without graft, (e.g., compression technique).

RUC Recommendations

Based on a review of the compelling evidence, the RUC made the following recommendations.

For CPT code 20680, the RUC agreed that the intra-operative time for this code is misvalued based on the significant changes in physician work for the removal of deep implants due to changes in technology. Using the survey's 25th percentile value for the work RVUs along with the 25th percentile value for intra-service time, and adjusting for the fact that this procedure is typically performed in an outpatient setting, the RUC recommended a work RVU of 5.86 for this service.

For CPT code 24430, the workgroup did not believe that the current work value for CPT code 24430 accounts for all the work typically involved with this service. This is based on the survey's physician time and visit data and a comparison to CPT code 24515, *Open treatment of humeral shaft fracture with plate/screws, with or without cerclage*, which is a less complex procedure than CPT code 24430. The RUC recommended a work RVU of 14.00 and an intra-service time of 102 minutes for this service, which was the 25th percentile for work of the survey data.

Based on a comparison to CPT code 27506, *Open treatment of femoral shaft fracture, with or without external fixation, with insertion of intramedullary implant, with or without and/or locking screws*, the workgroup determined that the current work RVUs for CPT code 27465, do not fully account for the work typically involved in shortening the femur because it typically includes the insertion of an intermedullary nail. However, the workgroup believed that CPT code 27465 should be valued lower than the reference service code, CPT code 27454, *Osteotomy, multiple, with realignment on intramedullary rod, femoral shaft (e.g., Sofield type procedure)*, which has a work RVU of 17.53, and is a greater intensity procedure. The RUC-recommended work RVU for CPT code 27645 was 17.50, based on the median of the survey data.

Based on a review of the survey data, the workgroup did not believe that there was compelling evidence to change the work RVU for CPT code 27470. Therefore, the RUC recommended that the current work RVU of 16.05 be maintained for this service. However, the workgroup also recommended using the new survey times as they believed the Harvard times from the original Harvard relative value study, which was used to establish RVUs at the outset of the Medicare PFS, are inflated.

For CPT code 27709, *Osteotomy; tibia and fibula*, the RUC reviewed the survey time and compared this service to CPT

code 27705, *Osteomy, tibia*, which has a work RVU of 10.36. The RUC recommended a work RVU of 16.50 for CPT code 27709 which would place the code in proper rank order with CPT code 27705.

The RUC recommended the referral of CPT codes 20692, 27472, and 27720 to the CPT Editorial Panel to clarify whether these 90-day global period codes should be exempt from modifier 51. (Modifier 51 denotes that a multiple procedure was performed.) The RUC was concerned that attempting to value these codes would lead to double counting some of the work.

The RUC-recommended valuation for these CPT codes was as follows: 20680 = 5.86 work RVUs; 24430 = 14.00 work RVUs; 27465 = 17.50 work RVUs; 27470 = 16.05 work RVUs; and 27709 = 16.50 work RVUs.

CMS Proposed Valuation

We are in agreement with the RUC-recommended work values for these trauma services.

c. Total Elbow and General Procedures

AAOS submitted the following elbow athroplasty service for review (see Table 12).

TABLE 12

CPT code	Description
24363	Arthroplasty, elbow; with distal humerus and proximal ulnar prosthetic replacement (e.g., total elbow).

In addition, we submitted the following CPT codes, in Table 13, for review.

TABLE 13

CPT code	Description
20600	Arthrocentesis, aspiration and/or injection; small joint or bursa (e.g., fingers, toes).
20610	Arthrocentesis, aspiration and/or injection; major joint or bursa (e.g., shoulder, hip, knee joint, subacromial bursa).
29075	Application, cast; elbow to finger (short arm).

Standard RUC surveys of these services were conducted.

RUC Recommendations

The RUC recommended maintaining the current work RVUs for CPT codes 20600, 20610, and 29075 because of the low response rate for the surveys and the lack of compelling evidence for changing the work value.

Based on a review of the survey data and information provided by the presenting specialty societies, AAOS and the American Society of Shoulder and Elbow Surgeons, the RUC concluded that the CPT code 24363 should be valued the same as CPT code 23472, *Arthroplasty, glenohumeral joint; total shoulder (glenoid and proximal humeral replacement (e.g., total shoulder)*, and recommended a work RVU of 21.07 to maintain appropriate rank-order alignment with this family of codes. The RUC-recommended valuation for these CPT codes was as follows: 20600 = 0.66 work RVUs; 20610 = 0.79 work RVUs; 24363 = 21.07 work RVUs; and 29075 = 0.77 work RVUs.

CMS Proposed Valuation

We agree with the RUC-recommended work RVUs for these elbow and general procedure services.

d. Wrist, Hand and Finger

We submitted the CPT codes in Table 14 for review.

TABLE 14

CPT code	Description
25447	Arthroplasty, interposition, intercarpal or carpometacarpal joints.
26055	Tendon sheath incision (e.g., for trigger finger).
26160	Excision of lesion of tendon sheath or joint capsule (e.g., cyst, mucous cyst, or ganglion), hand or finger.
26600	Closed treatment of metacarpal fracture, single; without manipulation, each bone.
26951	Amputation, finger or thumb, primary or secondary, any joint or phalanx, single, including neurectomies; with direct closure.
64721	Neuroplasty and/or transposition; median nerve at carpal tunnel.

CPT code 64702, *Neuroplasty; digital, one or both, same digit*, was submitted by the American Society for Surgery of the Hand (ASSH) with the rationale that this code is based on inaccurate Harvard physician times that are low compared to other hand surgery codes. Standard RUC surveys of these services were conducted.

RUC Recommendations

Based on a review of the survey data, the RUC recommended that the current work RVUs be maintained for CPT codes 25447, 26055, 26160, and 64721.

For CPT code 26600, the workgroup examined the survey data presented by the specialty society and agreed that the current work value of 1.96 RVUs may not fully reflect the value of all post-operative visits that are the current standard of care and that the CPT code most frequently cited as a reference code (CPT code 26720, *Closed treatment of phalangeal shaft fracture, proximal or middle phalanx, finger or thumb; without manipulation, each*), also understates the number of post-operative visits. The workgroup validated the survey median value of 2.40 work RVUs by performing a

building-block calculation that added the value of an additional post-operative visit (CPT code 99212 at 0.43 work RVUs) to the current work value for CPT code 26600 of 1.96 for a total of 2.39 work RVUs. Since this value was almost identical to the median survey value of 2.40, the RUC recommended accepting this median value for the work RVUs for CPT code 26600.

For CPT code 26951, the RUC workgroup agreed that the current value of 4.58 work RVUs for this code creates a rank order anomaly when compared to the reference code (CPT code 26185, *Sesamoidectomy, thumb or finger (separate procedure))*, which has a work RVU of 5.24. Based on a review of survey data, the RUC recommended that CPT code 26951 should be assigned work RVUs of 5.25 (the 25th percentile survey value) but that the survey median intra-service time of 45 minutes should be used since that is equal to the reference code.

For CPT code 64702, the RUC workgroup agreed that the current value for this service of 4.22 work RVUs does not include the number of post-operative days typically associated with this procedure. The workgroup believed that adding the work RVUs (1.3 work RVUs) associated with two additional outpatient visits, represented by CPT code 99213, produces an appropriate work RVU for this service and also places CPT code 64702 in the proper rank order with the reference service. The RUC recommended 5.52 work RVUs for CPT code 64702.

The RUC-recommended work RVUs for these CPT codes are as follows: 25447 = 10.35 work RVUs; 26055 = 2.69 work RVUs; 26160 = 3.15 work RVUs; 26600 = 2.40 work RVUs; 26951 = 5.25 work RVUs; 64702 = 5.52 work RVUs; and 64721 = 4.28 work RVUs.

CMS Proposed Valuation

We are in agreement with the RUC-recommended work values for wrist, hand and finger services.

e. Total Joint and Hip Fracture

We submitted three CPT codes for review (see Table 15).

TABLE 15

CPT code	Description
27130	Arthroplasty, acetabular and proximal femoral prosthetic replacement (total hip arthroplasty), with or without autograft or allograft.
27236	Open treatment of femoral fracture, proximal end, neck, internal fixation or prosthetic replacement.
27447	Arthroplasty, knee, condyle and plateau; medial AND lateral compartments with or without patella resurfacing (total knee arthroplasty).

The specialty society did not submit surveys for these codes, which is the accepted RUC method, for the RUC's consideration of changes to current work RVUs. Instead the specialty society developed proposed values for these services based on data obtained from the VA NSQIP database and the Medicare DRG database. The specialty society did survey its membership to obtain the data, but did not provide the workgroup or the RUC with this information, stating the vignettes did not describe a typical patient for this series of codes. Thus, the survey data for these codes was not available for the RUC workgroup to review at its August 2005 meeting.

The RUC requested that the specialty society survey its members on these three codes so that survey data could be used to evaluate the codes at the September 2005 RUC meeting. The specialty society used survey data, as well as NSQIP data and Medicare DRG data, to evaluate pre-service and intra-service times for these codes. The workgroup, as well as the RUC, was uncomfortable with mixing data from three separate sources in lieu of the established and accepted methodology of the RUC. The specialty society maintained the NSQIP data was more accurate than the survey data.

RUC Recommendations

The RUC did not find any compelling evidence to change the current work RVUs assigned to these services. Based on a review of the data, the RUC recommended maintaining the current work RVUs of 20.09 for CPT code 27130, 15.58 for CPT code 27236 and 21.45 for CPT code 27447, but also recommended using the new physician time data for each of these services.

CMS Proposed Valuation

For these three CPT codes (27130, 27236,and 27447), the specialty society used NSQIP and Medicare DRG data instead of the standard RUC survey methodology to create an intra-service time. Medicare DRG data has not been used by CMS or the RUC to evaluate new or existing CPT codes. CPT code 27130 has never been reviewed by the RUC. It currently has 20.09 work RVUs which is based on the following Harvard time data: pre-service time of 68 minutes, intra-service time of 128 minutes, post-service time of 36 minutes and eight hospital days. We believe that this service can be compared to CPT codes 43641, *Vagotomy including pyloroplasty, with or without gastrostomy; parietal cell (highly selective)*, and 60260, *Thyroidectomy, removal of all remaining thyroid tissue following previous removal of a portion of thyroid.* Both codes were reviewed by the RUC during the second 5-Year Review. CPT code 43641 has 60 minutes pre-service time, 150 minutes intra-service time, 30 minutes post-service time, and 6 hospital days, resulting in work RVUs of 17.24. CPT code 60260 has 60 minutes pre-service time, 145 minutes intra-service time and 30 minutes post-service time with 2 hospital days, resulting in work RVUs of 17.44. We believe CPT code 27130 is similar in work and intensity to CPT code 43641, and if one removes 2 hospital days (code 99231), this would result in a work RVU of 15.96. Therefore, we recommend a work RVU of 15.96 for CPT code 27130.

CPT code 27236 has never been reviewed by the RUC. It has a pre-service time of 74 minutes, an intra-service time of 89 minutes, a post-service time of 27 minutes, 100 minutes for hospital days, and 57 minutes for office visits for a total time of 347 minutes based on the Harvard time data, resulting in work RVUs of 15.58. We believe CPT codes 34421, *Thrombectomy, direct or with catheter; vena cava, iliac, femoropopliteal vein, by leg incision*, and 47600, *Cholecystectomy*, which were included in the second 5-Year Review, are similar in work intensity and time to CPT code 27236. CPT code 34421 has a pre-service time of 70 minutes, an intra-service time of 95 minutes, a post-service time of 221 minutes, and total time of 386 minutes, resulting in work RVUs of 11.98. CPT code 47600 has a pre-service time of 75 minutes, an intra-service time of 80 minutes, and a post-service time of 194 minutes for a total time of 349 minutes, resulting in work

RVUs of 13.56. We propose a work RVU of 12.77 for CPT code 27236, which is the median value for these two codes and maintains relativity within this family of codes.

CPT Code 27447 has never been reviewed by the RUC. It has 21.45 work RVUs, which is based on the following Harvard time data: pre-service time of 60 minutes, intra-service time 139 minutes, post-service time of 37 minutes, 118 minutes for hospital days, and 54 minutes for office visits for a total time of 408 minutes. We believe this service is comparable to CPT code 35671, *Bypass graft, with other than vein; popliteal-tibial or -peroneal artery*, which was reviewed during the second 5-Year Review. This service has a pre-service time of 70 minutes, an intra-service time of 135 minutes, and a post-service time of 206 minutes for a total time of 411 minutes, resulting in work RVUs of 19.30. We believe CPT code 27447 is similar in work intensity and time to CPT code 35671 and propose work RVUs of 19.30 for CPT code 27447.

f. Additional Fracture Codes

The AAOS also submitted the following CPT codes listed in Table 16 and the ASSH submitted CPT code 25620. However, the specialty societies believed clarification was needed for the CPT descriptor for these services, as there was a question whether the current valuation for these codes includes the application of internal and external fixation to a fracture site.

TABLE 16

CPT code	Description
23515	Open treatment of clavicle fracture, with or without internal or external fixation.
23585	Open treatment of scapular fracture (body, glenoid or acromion) with or without internal fixation.
23615	Open treatment of proximal humeral (surgical or anatomical neck) fracture, with or without internal or external fixation, with or without repair of tuberosity(s).
23616	Open treatment of proximal humeral (surgical or anatomical neck) fracture, with or without internal or external fixation, with or without repair of tuberosity(s); with proximal humeral prosthetic replacement.
23630	Open treatment of greater humeral tuberosity fracture, with or without internal or external fixation.
23670	Open treatment of shoulder dislocation, with fracture of greater humeral tuberosity, with or without internal or external fixation.
23680	Open treatment of shoulder dislocation, with surgical or anatomical neck fracture, with or without internal or external fixation.
24545	Open treatment of humeral supracondylar or transcondylar fracture, with or without internal or external fixation; without intercondylar extension.
24546	Open treatment of humeral supracondylar or transcondylar fracture, with or without internal or external fixation; with intercondylar extension.
24575	Open treatment of humeral epicondylar fracture, medial of lateral, with or without internal or external fixation.
24579	Open treatment of humeral condylar fracture, medial or lateral, with or without internal or external fixation.
24635	Open treatment of Monteggia type of fracture dislocation at elbow (fracture proximal end of ulna with dislocation of radial head), with or without internal or external fixation.
24665	Open treatment of radial head or neck fracture, with or without internal fixation or radial head excision.
24685	Open treatment of ulnar fracture proximal end (olecranon process), with or without internal or external fixation.
25515	Open treatment of radial shaft fracture, with or without internal or external fixation.
25526	Open treatment of radial shaft fracture, with internal and/or external fixation and open treatment, with or without internal or external fixation of distal radioulnar joint (Galeazzi fracture/dislocation), includes repair of triangular fibrocartilage complex.
25545	Open treatment of ulnar shaft fracture, with or without internal or external fixation.
25574	Open treatment of radial AND ulnar shaft fractures, with internal or external fixation; of radius OR ulna.
25575	Open treatment of radial AND ulnar shaft fractures, with internal or external fixation; of radius AND ulna.
25620	Open treatment of distal radial fracture (e.g., Colles or Smith type) or epiphyseal separation, with or without fracture of ulnar styloid, with or without internal or external fixation.
25628	Open treatment of carpal scaphoid (navicular) fracture, with or without internal or external fixation.
26615	Open treatment of metacarpal fracture, single, with or without internal or external fixation, each bone.
26665	Open treatment of carpometacarpal fracture dislocation, thumb (Bennett fracture), with or without internal or external fixation.
26685	Open treatment of carpometacarpal dislocation, other than thumb, with or without internal or external fixation, each joint.
26715	Open treatment of metacarpophalangeal dislocation, single, with or without internal or external fixation.
26735	Open treatment of phalangeal shaft fracture, proximal or middle phalanx, finger or thumb, with or without internal or external fixation, each.
26746	Open treatment of articular fracture, involving metacarpophalangeal or interphalangeal joint, with or without internal or external fixation, each.
26765	Open treatment of distal phalangeal fracture, finger or thumb, with or without internal or external fixation, each.
26785	Open treatment of interphalangeal joint dislocation, with or without internal or external fixation, single.
27248	Open treatment of greater trochanteric fracture, with or without internal of external fixation.
27511	Open treatment of femoral supracondylar or transcondylar fracture without intercondylar extension, with or without internal or external fixation.
27513	Open treatment of femoral supracondylar or transcondylar fracture with intercondylar extension, with or without internal or external fixation.
27514	Open treatment of femoral fracture, distal end, medial of lateral condyle, with or without internal or external fixation.
27519	Open treatment of distal femoral epiphyseal separation, with or without internal or external fixation.
27535	Open treatment of tibial fracture, proximal (plateau); unicondylar, with or without internal of external fixation.
27540	Open treatment of intercondylar spine(s) and/or tuberosity fracture(s) of the knee, with or without internal or external fixation.
27556	Open treatment of knee dislocation, with or without internal or external fixation; without primary ligamentous repair of augmentation/reconstruction.
27766	Open treatment of medial malleolus fracture, with or without internal or external fixation.
27784	Open treatment of proximal fibula or shaft fracture, with or without internal or external fixation.

TABLE 16—Continued

CPT code	Description
27792	Open treatment of distal fibular fracture (lateral malleolus), with or without internal or external fixation.
27814	Open treatment of bimalleolar ankle fracture, with or without internal or external fixation.
27822	Open treatment of trimalleolar ankle fracture, with or without internal or external fixation, medial and/or lateral malleolus; without fixation of posterior lip.
27826	Open treatment of fracture of weight bearing articular surface/portion of distal tibia (e.g., pilon or tibial plafond), with internal or external fixation; of fibula only.
27827	Open treatment of fracture of weight bearing articular surface/portion of distal tibia (e.g., pilon or tibial plafond), with internal or external fixation; of tibia only.
27828	Open treatment of fracture of weight bearing articular surface/portion of distal tibia (e.g., pilon or tibial plafond), with internal or external fixation; of both tibia and fibula.
27829	Open treatment of distal tibiofibular joint (syndesmosis) disruption, with or without internal or external fixation.
27832	Open treatment of proximal tibiofibular joint dislocation, with or without internal or external fixation, or with excision of proximal fibula.
28415	Open treatment of calcaneal fracture, with or without internal or external fixation.
28445	Open treatment of talus fracture, with or without internal or external fixation.
28465	Open treatment of tarsal bone fracture (except talus and calcaneus), with or without internal or external fixation, each.
28485	Open treatment of metatarsal fracture, with or without internal or external fixation, each.
28505	Open treatment of fracture of great toe, phalanx or phalanges, with or without internal or external fixation.
28525	Open treatment of fracture, phalanx or phalanges, other than great toe, with or without internal or external fixation, each.
28555	Open treatment of tarsal bone dislocation, with or without internal or external fixation.
28585	Open treatment of talotarsal joint dislocation, with or without internal or external fixation.
28615	Open treatment of tarsometatarsal joint dislocation, with or without internal or external fixation.
28645	Open treatment of metatarsophalangeal joint dislocation, with or without internal or external fixation.
28675	Open treatment of interphalangeal joint dislocation, with or without internal or external fixation.

RUC Recommendations

The RUC recommended that these CPT codes be referred to the CPT Editorial Panel for review and clarification.

CMS Proposed Valuation

We will maintain the current valuation for these services pending the results of the review by the CPT Editorial Panel.

3. Gynecology, Urology, Pain Medicine, and Neurosurgery

[If you choose to comment on issues in this section, please include the caption ''DISCUSSION OF COMMENTS—GYNECOLOGY, UROLOGY, PAIN MEDICINE, AND NEUROSURGERY'' at the beginning of your comments.]

a. Obstetrics and Gynecology

The American College of Obstetricians and Gynecologists (ACOG) submitted the CPT codes in Table 17 for review.

TABLE 17

CPT code	Description
49200	Excision or destruction, open, intra-abdominal or retroperitoneal tumors or cysts or endometriomas.
49201	Excision or destruction, open, intra-abdominal or retroperitoneal tumors or cysts or endometriomas; extensive.
56631	Vulvectomy, radical, partial; with unilateral inguinofemoral lymphadenectomy.
56632	Vulvectomy, radical, partial; with bilateral inguinofemoral lymphadenectomy.
56634	Vulvectomy, radical, complete; with unilateral inguinofemoral lymphadenectomy.
56637	Vulvectomy, radical, complete; with bilateral inguinofemoral lymphadenectomy.
56640	Vulvectomy, radical, complete, with inguinofemoral, iliac, and pelvic lymphadenectomy.
57160	Fitting and insertion of pessary or other intravaginal support device.
57240	Anterior colporrhaphy, repair of cystocele with or without repair of urethrocele.
57250	Posterior colporrhaphy, repair of rectocele with or without perineorrhaphy.
57260	Combined anteroposterior colporrhaphy.
57265	Combined anteroposterior colporrhaphy; with enterocele repair.
57550	Excision of cervical stump, vaginal approach.
57555	Excision of cervical stump, vaginal approach; with anterior and/or posterior repair.
57556	Excision of cervical stump, vaginal approach; with repair of enterocele.

However, the specialty society subsequently withdrew the following CPT codes: 49200, 49201, 56631, 56632, 56634, 56637, 56640, 57550, 57555, and 57556.

We identified five CPT codes for review but withdrew one code, CPT code 58260 (see Table 18).

TABLE 18

CPT code	Description
57500	Biopsy, single or multiple, or local excision of lesion, with or without fulguration (separate procedure).
58120	Dilation and curettage, diagnostic and/or therapeutic (nonobstetrical).
58150	Total abdominal hysterectomy (corpus and cervix), with or without removal of tube(s), with or without removal of ovary(s).
58260	Vaginal hysterectomy, for uterus 250 grams or less.

TABLE 18—Continued

CPT code	Description
58720	Salpingo-oophorectomy, complete or partial, unilateral or bilateral (separate procedure).

A standard RUC survey with over 30 responses was used for these codes.

RUC Recommendations

The RUC recommended maintaining the existing RVUs for CPT codes 57160, 58120 and 58720. The RUC believed there was no compelling evidence presented to indicate that there had been a change in work for CPT code 57160. The RUC also agreed with the specialty society that the survey data collected validated the existing times and existing RVUs for CPT codes 58120 and 58720.

The RUC recommended increasing the work value for the remaining CPT codes. The RUC agreed with the specialty society that these procedures were currently undervalued because of rank-order anomalies, changes in patient population or incorrect assumptions made in the previous valuation of the service. However, the RUC-recommended work values for each service were below the level presented by the specialty society. The RUC recommended the use of the surveys' 25th percentile work RVUs for four of the services, CPT codes 57240, 57250, 57500 and 58150, and the 75th percentile for CPT codes 57260 and 57265. The 75th percentile was used because the workgroup believed that otherwise there would be a rank order anomaly between the more complex vagina repair services, CPT codes 57280 and 57265, and the simpler procedures, CPT codes 57240 and 57250.

The RUC-recommended work values for these services are as follows: 57160 = 0.89 work RVUs; 57240 = 10.56 work RVUs; 57250 = 10.56 work RVUs; 57260 = 13.50 work RVUs; 57265 = 15.00 work RVUs; 57500 = 1.20 work RVUs; 58120 = 3.27 work RVUs; 58150 = 15.98 work RVUs; and 58720 = 11.34 work RVUs.

CMS Proposed Valuation

We propose to accept the RUC recommendations for these obstetrics and gynecology services. We initially had concerns with the use of the surveys' 75th percentile for the recommendation of work RVUs for CPT codes 57260 and 57265, but in comparison with similar services, we believe that the RUC recommendations for these services create the correct rank order, both within the family of codes and with other similar services.

b. Urology

The American Urological Association (AUA) and the Coalition for the Advancement of Prosthetic Urology (CAPU) submitted five CPT codes for review (see Table 19). However, the specialty society subsequently withdrew four CPT codes (53445, 54400, 54405, and 54411).

TABLE 19

CPT code	Description
51798	Measurement of post-voiding residual urine and/or bladder capacity by ultrasound, non-imaging.
53445	Insertion of inflatable urethral/bladder neck sphincter, including placement of pump, reservoir, and cuff.
54400	Insertion of penile prosthesis; non-inflatable (semi-rigid).
54405	Insertion of multi-component, inflatable penile prosthesis, including placement of pump, cylinders, and reservoir.
54411	Removal and replacement of all components of a multi-component inflatable penile prosthesis through an infected field at the same operative session, including irrigation and debridement of infected tissue.

In addition, we identified seven CPT codes for review because of possible changes in technology or because the service had never been reviewed by the RUC (see Table 20). A standard RUC survey with over 30 responses was used for the following codes.

TABLE 20

CPT code	Description
50590	Lithotripsy, extracorporeal shock wave.
51720	Bladder instillation of anticarcinogenic agent (including detention time).
52000	Cystourethroscopy (separate procedure).
52204	Cystourethroscopy, with biopsy.
52601	Transurethral electrosurgical resection of prostate, including control of postoperative bleeding, complete (vasectomy, meatotomy, cystourethroscopy, urethral calibration and/or dilation, and internal urethrotomy are included).
55700	Biopsy, prostate; needle or punch, single or multiple, any approach.
57288	Sling operation for stress incontinence (e.g., fascia or synthetic).

RUC Recommendations

Of the eight codes presented with survey data, the RUC recommended maintaining the existing work RVUs for two codes. For CPT code 57288, the RUC believed that the survey median supported the specialty society's contention that the work currently associated with the code is accurate. For CPT code 50590, the RUC believed that the current work value more accurately reflected the work involved in the service than did the survey, which increased the work RVUs while decreasing the physician intra-time substantially.

The RUC recommended decreasing the current work RVUs for CPT code 51720 to reflect the median work RVU from the survey.

The RUC agreed with the specialty society's recommendations for an increase to the existing RVUs for CPT code 51798. This procedure was

originally reviewed by the RUC in April 2002 with a recommendation 0.38 work RVUs to reflect the physician work believed to be typically associated with this procedure. However, in the CY 2002 Physician Fee Schedule final rule with comment period (66 FR 55246), we contended that there was no physician work associated with this service and assigned work RVUs of 0.00. This decision was upheld by the refinement process that is used to address comments received on the valuation of new and revised CPT codes and that was discussed in the CY 2004 Physician Fee Schedule final rule with comment period (67 FR 63227). However, the RUC agreed with the specialty society that this procedure is performed by physicians and reaffirmed its previous recommendation of 0.38 work RVUs for this procedure.

The RUC recommended increasing the work RVUs for four codes, but below the level requested by the specialty society (that is, recommending work RVUs equal to the surveys' 25th percentile for CPT codes 52000 and 55700, equal to the median for CPT code 52601 and less than the 25th percentile for CPT code 52204). The RUC agreed with the specialty society that these procedures were currently undervalued due to changes in technology, changes in patient populations and incorrect assumptions that were made in the previous valuation of the service.

The RUC-recommended work values for these CPT codes for urology services are as follows: 50590 = 9.08 work RVUs; 51720 = 1.50 work RVUs; 51798 = 0.38 work RVUs; 52000 = 2.23 work RVUs; 52204 = 2.59 work RVUs; 52601 = 14.00 work RVUs; 55700 = 2.58 work RVUs; and 57288 = 13.00 work RVUs.

CMS Proposed Valuation

We accept the RUC recommendations for these urology services except for CPT code 51798. The RUC recommendation for bladder ultrasound was based on CPT code 79857 (the pelvic ultrasound (nonobstetric) procedure) as the reference code. (CPT code 76857 should be used if the urinary bladder alone is imaged, whereas CPT code 51798 should be utilized if a bladder volume or post-void residual measurement is obtained without imaging the bladder.) We disagree that this is an appropriate reference code because the pelvic ultrasound procedure is very different from a bladder ultrasound procedure. The bladder ultrasound procedure only results in a ''numerical reading'' of milliliters of residual urine in the bladder and does not produce an image on a screen for a physician to interpret like many other ultrasound procedures (for example, the pelvic ultrasound). Therefore, we disagree with the RUC recommendation to use the 0.38 physician work RVUs for the professional component of code 76857 as the work RVUs for CPT code 51798 because we do not believe this procedure involves physician work since the machine only produces a numerical reading.

c. Spine Surgery

We identified the CPT codes in Table 21 for the 5-Year Review.

TABLE 21

CPT code	Description
22520	Percutaneous vertbroplasty, one vertebral body, unilateral or bilateral, injection; thoracic.
22554	Arthrodesis, anterior interbody technique, including minimal diskectomy to prepare interspace (other than for decompression); cervical below C2.
22612	Arthrodesis, posterior or posterolateral technique, single level; lumbar (with or without lateral transverse technique).
22840	Posterior non-segmental instrumentation (e.g., Harrington rod technique, pedicle fixation across one interspace, atlantoaxial transarticular screw fixation, sublaminar wiring at C1, facet screw fixation).
63047	Laminectomy, facetectomy and foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root(s), (e.g., spinal or lateral recess stenosis)), single vertebral segment; lumbar.
63048	Laminectomy, facetectomy and foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root(s), (e.g., spinal or lateral recess stenosis)), single vertebral segment; each additional segment, cervical, thoracic, or lumbar (List separately in addition to code for primary procedure).
63075	Diskectomy, anterior, with decompression of spinal cord and/or nerve root(s), including osteophytectomy; cervical, single interspace.

With approval of the RUC, the specialty society used a modified RUC survey that included surveys of time (pre-service, intra-service, immediate post-service), post-operative visits and estimates of total work. Two reference codes were used to survey the estimates of intensity and complexity. There were well over 100 responses to each survey.

RUC Recommendations

The RUC accepted the specialty society's recommendations to decrease the existing work RVUs for three procedures: CPT codes 22554, 63047 and 63075. The RUC agreed that these procedures were overvalued due to decreases in the length of stay and physician time. The RUC also accepted the specialty society's recommendation to maintain the work associated with CPT codes 22520 and 22840. The RUC agreed with the specialty society that the survey data collected validated the existing work RVUs associated with these codes. For CPT codes 22612 and 63048, the RUC recommended increases in the work RVUs, but less than the increases requested by the specialty society. The RUC agreed that these procedures were undervalued due to increases in length of stay and the incorrect assumptions made in the previous valuation of the service.

The specific RUC-recommended work RVUs were as follows: 22520 = 8.90 work RVUs; 22554 = 16.40 work RVUs; 22612 = 22.00 work RVUs; 22840 = 12.52 work RVUs; 63047 = 14.08 work RVUs; 63048 = 3.55 work RVUs; and 63075 = 18.58 work RVUs.

CMS Proposed Valuation

We accept the work RVUs recommended by the RUC for CPT codes 22520, 22554, 22840, 63047 and 63075. However, we have technical concerns with the recommendations for CPT codes 22612 and 63048.

The workgroup recommended the survey's 25th percentile for CPT code 22612 to keep the appropriate rank order with the reference service, CPT code 22595, which is a more complex procedure. However, there was a typographical error in the information presented by the specialty society that listed the work RVUs for the reference code as 23.36, rather than the correct value of 19.36 work RVUs. Therefore, the recommended work value of 22.00 RVUs is clearly inappropriate and we

are proposing to maintain the current work RVUs of 20.97 for this service.

There is an additional typographical error in the specialty society survey data for CPT code 63048. The summary information lists the reference code as also being CPT code 63048. Therefore, there is no information given that compares the respondents' estimates of complexity and intensity between CPT code 63048 and the reference code. Because we do not have sufficient information to decide if the recommended work RVUs are appropriate, we are proposing to maintain the current work RVUs of 3.26 for CPT code 63048.

d. Spinal Pump Infusion and Stimulators

The American Academy of Pain Medicine (AAPM) and the American Society of Anesthesiologists (ASA) initially submitted several CPT codes that were subsequently withdrawn from the 5-Year Review (see Table 22).

TABLE 22

CPT code	Description
62350	Implantation, revision or repositioning of tunneled intrathecal or epidural catheter, for long-term medication administration via an external pump or implantable reservoir/infusion pump; without laminectomy.
62351	Implantation, revision or repositioning of tunneled intrathecal or epidural catheter, for long-term medication administration via an external pump or implantable reservoir/infusion pump; with laminectomy.
62355	Removal of previously implanted intrathecal or epidural catheter.
62360	Implantation or replacement of device for intrathecal or epidural drug infusion; subcutaneous reservoir.
62361	Implantation or replacement of device for intrathecal or epidural drug infusion; non-programmable pump.
62362	Implantation or replacement of device for intrathecal or epidural drug infusion; programmable pump, including preparation of pump, with or without programming.
62365	Removal of subcutaneous reservoir or pump, previously implanted for intrathecal or epidural infusion.
63650	Percutaneous implantation of neurostimulator electrode array, epidural.
63655	Laminectomy for implantation of neurostimulator electrodes, plate/paddle, epidural.
63660	Revision or removal of spinal neurostimulator electrode percutaneous array(s) or plate/paddle(s).
63685	Insertion or replacement of spinal neurostimulator pulse generator or receiver, direct or inductive coupling.
63688	Revision or removal of implanted spinal neurostimulator pulse generator or receiver.
64550	Application of surface (transcutaneous) neurostimulator.
64553	Percutaneous implantation of neurostimulator electrodes; cranial nerve.
64555	Percutaneous implantation of neurostimulator electrodes; peripheral nerve (excludes sacral nerve).
64560	Percutaneous implantation of neurostimulator electrodes; autonomic nerve.
64561	Percutaneous implantation of neurostimulator electrodes; sacral nerve (transforaminal placement).
64565	Percutaneous implantation of neurostimulator electrodes; neuromuscular.
64573	Incision for implantation of neurostimulator electrodes; cranial nerve.
64575	Incision for implantation of neurostimulator electrodes; peripheral nerve (excludes sacral nerve).
64577	Incision for implantation of neurostimulator electrodes; autonomic nerve.
64580	Incision for implantation of neurostimulator electrodes; neuromuscular.
64581	Incision for implantation of neurostimulator electrodes; sacral nerve (transforaminal placement).
64585	Revision or removal of peripheral neurostimulator electrodes.
64590	Insertion or replacement of peripheral neurostimulator pulse generator or receiver, direct or inductive coupling.
64595	Revision or removal of peripheral neurostimulator pulse generator or receiver.

e. Aneurysm, Epilepsy and Skull Procedures

The American Association of Neurological Surgeons (AANS) and Congress of Neurological Surgeons (CNS) submitted six CPT codes for review (see Table 23).

TABLE 23

CPT code	Description
61537	Craniotomy with elevation of bone flap; for lobectomy, temporal lobe, without electrocorticography during surgery.
61538	Craniotomy with elevation of bone flap; for lobectomy, temporal lobe, with electrocorticography during surgery.
61697	Surgery of complex intracranial aneurysm, intracranial approach; carotid circulation.
61698	Surgery of complex intracranial aneurysm, intracranial approach; vertebrobasilar circulation.
61700	Surgery of simple intracranial aneurysm, intracranial approach; carotid circulation.
61702	Surgery of simple intracranial aneurysm, intracranial approach; vertebrobasilar circulation).

We submitted two CPT codes for review (see Table 24).

TABLE 24

CPT code	Description
61154	Burr hole(s) with evacuation and/or drainage of hematoma, extradural or subdural.
61312	Craniectomy or craniotomy for evacuation of hematoma, supratentorial; extradural or subdural.

A standard RUC survey with over 30 responses was used for six of the codes. The surveys for CPT codes 61537 and 61538 had only 12 and 14 responses, respectively.

RUC Recommendations

The RUC agreed with the specialty society that the existing RVUs for CPT code 61154 should be maintained because there was no compelling evidence that the work currently associated with this procedure has changed. The RUC accepted the specialty society's requested increase to the existing work RVUs, as reflected by the survey median, for CPT code 61312, agreeing with the specialty society that the increased use of anticoagulants by these patients has increased the intensity of the intra-service work. The RUC recommended increasing the work RVUs for CPT codes 61697, 61698, 61700 and 61702, but at or below the surveys' 25th percentile.

While the workgroup recommended maintaining the current work RVUs for CPT codes 61537 and 61538, at the subsequent RUC meeting, the specialty society extracted these codes for discussion and the RUC recommended the 25th percentile from the surveys for the work RVU.

The RUC-recommended work RVUs for these CPT codes are as follows: 61154 = 14.97 work RVUs; 61312 = 27.00 work RVUs; 61537 = 35.00 work RVUs; 61538 = 38.00 work RVUs; 61697 = 57.31 work RVUs; 61698 = 64.03 work RVUs; 61700 = 46.01 work RVUs; and 61702 = 54.28 work RVUs.

CMS Proposed Valuation

We accept the RUC-recommended work RVUs for these neurosurgery services.

4. Radiology, Pathology, and Other Miscellaneous Services

[If you choose to comment on issues in this section, please include the caption ''DISCUSSION OF COMMENTS-RADIOLOGY, PATHOLOGY, and OTHER MISC. SERVICES'' at the beginning of your comments.]

a. Pathology

The College of American Pathologists submitted four CPT codes for review using the rationale that there have been changes in cancer protocols and the content of work (see Table 25). The specialty society conducted a full RUC survey for these codes.

TABLE 25

CPT code	Description
88309	Level VI—Surgical pathology, gross and microscopic examination; Bone Resection; Breast, Mastectomy—with Regional Lymph Nodes; Colon, Segmental Resection for Tumor; Colon, Total Resection; Esophagus, Partial/Total Resection; Extremity, Disarticulation; Fetus, with Dissection; Larynx, Partial/Total Resection—with Regional Lymph Nodes; Lung—Total/Lobe/Segment Resection; Pancreas, Total/Subtotal Resection; Prostate, Radical Resection; Small Intestine, Resection for Tumor; Soft Tissue Tumor, Extensive Resection; Stomach—Subtotal/Total Resection for Tumor; Testis, Tumor; Tongue/Tonsil—Resection for Tumor; Urinary Bladder, Partial/Total Resection; Uterus, with or without Tubes and Ovaries, Neoplastic; Vulva, Total/Subtotal Resection.
88321	Consultation and report on referred slides prepared elsewhere.
88323	Consultation and report on referred material requiring preparation of slides.
88325	Consultation, comprehensive, with review of records and specimens, with report on referred material.

RUC Recommendations

The RUC reviewed the specialty's survey results for each code and believed the specialty society had presented compelling evidence to change the relative work value for each code because all were undervalued for the increased physician work now involved in the services. The RUC believed that the change in work was due to the increased number and type of slides undergoing review in the typical case, and, in particular, the number of immunohistochemical slides that must undergo review. Based on recent literature, the RUC also believed that the clinical practice of these pathology consultations had changed. In addition, the RUC agreed with the specialty society that the survey's 25th percentile reflected the true physician work for each of the codes.

The RUC-recommended work RVUs for these CPT codes are as follows: 88309 = 2.80 work RVUs, 88321 = 1.63 work RVUs, 88323 = 1.83 work RVUs, and 88325 = 2.50 work RVUs.

CMS Proposed Valuation

We are in agreement with all of these RUC-recommended work RVUs for pathology services.

b. Radiation Oncology

We submitted the radiation oncology CPT codes in Table 26 for review.

TABLE 26

CPT code	Description
77263	Therapeutic radiology treatment planning; complex.
77280	Therapeutic radiology simulation-aided field setting; simple.
77290	Therapeutic radiology simulation-aided field setting; complex.
77300	Basic radiation dosimetry calculation, central axis depth dose calculation, TDF, NSD, gap calculation, off axis factor, tissue inhomogeneity factors, calculation of non-ionizing radiation surface and depth dose, as required during course of treatment, only when prescribed by the treating physician.
77315	Teletherapy, isodose plan (whether hand or computer calculated); complex (mantle or inverted Y, tangential ports, the use of wedges, compensators, complex blocking, rotational beam, or special beam considerations).
77331	Special dosimetry (e.g., TLD, microdosimetry) (specify), only when prescribed by the treating physician.
77334	Treatment devices, design and construction; complex (irregular blocks, special shields, compensators, wedges, molds or casts).
77470	Special treatment procedure (e.g., total body irradiation, hemibody radiation, per oral, endocavitary or intraoperative cone irradiation).

Standard RUC surveys were conducted for these services. The survey results indicated that the work RVUs for each code should be maintained at their current level, and the specialty society, the American Society for Therapeutic Radiology and Oncology (ASTRO), recommended no change in the work RVU.

RUC Recommendations

The RUC agreed with the survey results and supported the specialty society's recommendation to maintain the work RVUs. The RUC found no compelling evidence to change the work RVUs for these CPT codes, and therefore, recommended maintaining the current work values for these CPT codes as follows: 77263 = 3.14 work RVUs; 77280 = 0.70 work RVUs; 77290 = 1.56 work RVUs; 77300 = 0.62 work RVUs; 77315 = 1.56 work RVUs; 77331 = 0.87 work RVUs; 77334 = 1.24 work RVUs; and 77470 = 2.09 work RVUs.

CMS Proposed Valuation

We are in agreement with all of these RUC-recommended work RVUs for radiology oncology.

c. Radiology

We requested that the CPT codes for radiology services in Table 27 be reviewed.

TABLE 27

CPT code	Description
70355	Orthopantogram.
71010	Radiologic examination, chest; single view, frontal.
71020	Radiologic examination, chest, two views, frontal and lateral.
71260	Computed tomography, thorax; with contrast material(s).
72192	Computed tomography, pelvis; without contrast material.
72193	Computed tomography, pelvis; with contrast material(s).
73100	Radiologic examination, wrist; two views.
73110	Radiologic examination, wrist; complete, minimum of three views.
73120	Radiologic examination, hand; two views.
73130	Radiologic examination, hand; minimum of three views.
73140	Radiologic examination, finger(s), minimum of two views.
74000	Radiologic examination, abdomen; single anteroposterior view.
74020	Radiologic examination, abdomen; complete, including decubitus and/or erect views.
74022	Radiologic examination, abdomen; complete acute abdomen series, including supine, erect, and/or decubitus views, single view chest.
74150	Computed tomography, abdomen; without contrast material.
74160	Computed tomography, abdomen; with contrast material(s).
76075	Dual energy x-ray absorptiometry (DXA), bone density study, one or more sites; axial skeleton (e.g., hips, pelvis, spine).
76700	Ultrasound, abdominal, B-scan and/or real time with image documentation; complete.
76830	Ultrasound, transvaginal.
78306	Bone and/or joint imaging; whole body.
78315	Bone and/or joint imaging; three phase study.
78465	Myocardial perfusion imaging; tomographic (SPECT), multiple studies (including attenuation correction when performed), at rest and/or stress (exercise and/or pharmacologic) and redistribution and/or rest injection, with or without quantification.
78478	Myocardial perfusion study with wall motion, qualitative or quantitative study (List separately in addition to code for primary procedure).
78480	Myocardial perfusion study with ejection fraction (List separately in addition to code for primary procedure).

In addition, the American College of Cardiology (ACC) and American College of Radiology (ACR) recommended four cardiac imaging codes be sent to the CPT Editorial Panel for review and clarification so that they may reflect current practice patterns (see Table 28). The RUC agreed with this recommendation.

TABLE 28

CPT code	Description
75552	Cardiac magnetic resonance imaging for morphology; without contrast material.
75553	Cardiac magnetic resonance imaging for morphology; with contrast material.
75554	Cardiac magnetic resonance imaging for function, with or without morphology; complete study.
75555	Cardiac magnetic resonance imaging for function, with or without morphology; limited study).

The specialty societies conducted standard RUC surveys for the remaining services.

RUC Recommendations

The RUC agreed with the survey results and found there was no compelling evidence to change the work RVUs for CPT codes 70355, 71010, 71020, 71260, 72192, 72193, 73100, 73110, 73120, 73130, 73140, 74000, 74020, 74022, 74150, 74160, 76700, 76830, 78306, 78315, and 78465.

The RUC recommended a reduction in the work RVU for the DXA service, CPT code 76075, because the workgroup believed that the actual work is less intense and more mechanical than the specialty society's description of the work. In addition, the RUC believed that the survey results provided insufficient evidence to support the current work RVU associated with CPT code 78478 and also believed that the physician time was overestimated. The RUC also recommended a reduction in the work RVUs for CPT code 78480 because it was not in the correct rank order and was therefore overvalued.

The RUC-recommended work RVUs for these CPT codes are as follows: 70355 = 0.20 work RVUs; 71010 = 0.18 work RVUs; 71020 = 0.22 work RVUs; 71260 = 1.24 work RVUs; 72192 = 1.09 work RVUs; 72193 = 1.16 work RVUs; 73100 = 0.16 work RVUs; 73110 = 0.17 work RVUs; 73120 = 0.16 work RVUs; 73130 = 0.17 work RVUs; 73140 = 0.13 work RVUs; 74000 = 0.18 work RVUs; 74020 = 0.27 work RVUs; 74022 = 0.32 work RVUs; 74150 = 1.19 work RVUs; 74160 = 1.27 work RVUs; 76075 = 0.20 work RVUs; 76700 = 0.81 work RVUs; 76830 = 0.69 work RVUs; 78306 = 0.86 work RVUs; 78315 = 1.02 work RVUs; 78465 = 1.46 work RVUs; 78478 = 0.50 work RVUs; and 78480 = 0.30 work RVUs.

CMS Proposed Valuation

We are in agreement with all of these RUC-recommended work RVUs for radiology services.

d. Endoscopy Procedures

We requested the RUC to review five endoscopy CPT codes because they had never been reviewed by the RUC (see Table 29). Standard RUC surveys were conducted.

TABLE 29

CPT code	Description
43235	Upper gastrointestinal endoscopy including esophagus, stomach, and either the duodenum and/or jejunum as appropriate; diagnostic, with or without collection of specimen(s) by brushing or washing (separate procedure).
43246	Upper gastrointestinal endoscopy including esophagus, stomach, and either the duodenum and/or jejunum as appropriate; with directed placement of percutaneous gastrostomy tube.
43750	Percutaneous placement of gastrostomy tube.
45330	Sigmoidoscopy, flexible; diagnostic, with or without collection of specimen(s) by brushing or washing (separate procedure).
45378	Colonoscopy, flexible, proximal to splenic flexure; diagnostic, with or without collection of specimen(s) by brushing or washing, with or without colon decompression (separate procedure).

RUC Recommendations

The RUC agreed with the survey results and found no compelling evidence to change the work RVUs for any of these services. Therefore, the RUC recommended the work values for these CPT codes be maintained as follows: 43235 = 2.39 work RVUs; 43246 = 4.32 work RVUs; 43750 = 4.48 work RVUs; 45330 = 0.96 work RVUs; and 45378 = 3.69 work RVUs.

CMS Proposed Valuation

We are in agreement with the RUC-recommended work RVUs for endoscopic procedure codes.

e. Neurology, Neuromuscular, and Nervous System

The American Academy of Neurology (AAN), American Clinical Neurophysiology Society (ACNS), American Association of Neuromuscular and Electrodiagnostic Medicine (AANEM), and the American Academy of Physical Medicine and Rehabilitation (AAPMR) submitted five neurology and neuromuscular CPT codes for this 5-Year Review and AAN and the American Academy of Pediatrics (AAP) jointly submitted CPT code 62270 (see Table 30).

TABLE 30

CPT code	Description
62270	Spinal puncture, lumbar, diagnostic.
95872	Needle electromyography using single fiber electrode, with quantitative measurement of jitter, blocking and/or fiber density, any/all sites of each muscle studied.
95925	Short-latency somatosensory evoked potential study, stimulation of any/all peripheral nerves or skin sites, recording from the central nervous system; in upper limbs.
95926	Short-latency somatosensory evoked potential study, stimulation of any/all peripheral nerves or skin sites, recording from the central nervous system; in lower limbs.
95927	Short-latency somatosensory evoked potential study, stimulation of any/all peripheral nerves or skin sites, recording from the central nervous system; in the trunk or head.
95953	Monitoring for localization of cerebral seizure focus by computerized portable 16 or more channel EEG, electroencephalographic (EEG) recording and interpretation, each 24 hours.

In addition, we requested the RUC to review five neurological CPT codes (see Table 31).

TABLE 31

CPT code	Description
95816	Electroencephalogram (EEG); including recording awake and drowsy.
95819	Electroencephalogram (EEG); including recording awake and asleep.
95861	Needle electromyography; two extremities with or without related paraspinal areas.
95900	Nerve conduction, amplitude and latency/velocity study, each nerve; motor, without F-wave study.
95904	Nerve conduction, amplitude and latency/velocity study, each nerve; sensory.

Standard RUC surveys were conducted for these services. The specialty societies believed the survey results indicated that the current work RVUs were either correctly valued or undervalued.

RUC Recommendations

The RUC found no compelling evidence to change the work RVUs for CPT codes 95816, 95819, 95861, 95900, 95904, 95925, 95926, and 95927. However, the RUC agreed that there was compelling evidence that CPT codes 95872 and 95953 were undervalued and recommended increasing their existing RVUs.

The RUC-recommended work RVUs for these services are as follows: 95816 = 1.08 work RVUs; 95819 = 1.08 work RVUs; 95861 = 1.54 work RVUs; 95872 = 3.00 work RVUs; 95900 = 0.42 work RVUs; 95904 = 0.34 work RVUs; 95925 = 0.54 work RVUs; 95926 = 0.54 work RVUs; 95927 = 0.54 work RVUs; and 95953 = 3.30 work RVUs.

For CPT code 62270, the RUC believed that there is a bimodal distribution of physician work associated with the code because there are two different typical patient types, infants and young children. The RUC and the specialty societies believed that the infant population requires less work than in the young child population. The RUC suggested that it may be reasonable for the specialty societies to eventually consider splitting the code into the two typical patient types to capture any differences in physician work. However, for the current CPT code 62270, the RUC recommended that it should be valued higher and recommended a work RVU of 1.37.

CMS Proposed Valuation

We are in agreement with all of the RUC-recommended work RVUs for neurology, neuromuscular and nervous system services except for the recommendation for CPT code 95872. We have concerns that the work recommendation for this service, which was based on the survey's 75th percentile for work, is not the correct valuation and is inappropriate for this service. We calculated the pre-service and post-service work RVU using the surveyed physician time data. Then, we subtracted the surveyed intra-service time from the current time. Next, we multiplied this difference in time by the calculated IWPUT using the specialty recommended total work RVUs to determine an intra-service work RVU. Adding the calculated work RVUs resulted in a work RVU of slightly less than 2.0, which is close to the same value as the survey median work RVU. In accordance with this analysis and the survey median, we are recommending a work RVU of 2.00.

f. Pulmonary Medicine

We requested the RUC to review three pulmonary medicine CPT codes (see Table 32).

TABLE 32

CPT code	Description
31622	Bronchoscopy, rigid or flexible, with or without fluoroscopic guidance; diagnostic, with or without cell washing (separate procedure).
94010	Spirometry, including graphic record, total and timed vital capacity, expiratory flow rate measurement(s), with or without maximal voluntary ventilation.
94657	Ventilation assist and management, initiation of pressure or volume preset ventilators for assisted or controlled breathing; subsequent days.

Standard RUC surveys were conducted. The specialty societies believed the survey results indicated that the current work RVUs were either correctly valued or undervalued.

RUC Recommendations

The RUC reviewed the survey results and recommendations from the specialty society for CPT codes 31622 and 94010 and found no compelling reason to change the work RVUs for these codes. However, the RUC agreed with the specialty society that the time data elements from the survey results reflected the typical patient encounter.

The RUC did find compelling evidence to support the specialty society's recommendation and survey work value results for CPT code 94657. However, the RUC determined that a rank order anomaly would be created with CPT code 94656 if the recommended value for CPT code 94657 was adopted. Therefore, the RUC recommended that this code be referred to the CPT Editorial Panel.

The RUC-recommended work RVUs for these codes are as follows: 31622 = 2.78 work RVUs and 94010 = 0.17 work RVUs.

CMS Proposed Valuation

We are in agreement with these RUC-recommended work RVUs for pulmonary medicine services.

g. Miscellaneous Services

(i) Anesthesia

The ASA requested that the RUC review code 00797, *Anesthesia for intraperitoneal procedures in upper abdomen including laparoscopy; gastric restrictive procedure for morbid obesity.* The ASA believed that the results of the standard RUC survey conducted by the specialty society indicated the physician work was undervalued for this code.

RUC Recommendations

The RUC reviewed the survey results and specialty society recommendation and agreed with its recommended median base unit value and physician time for the code. The RUC recommended base unit valuation for this service was 11.00.

CMS Proposed Valuation

We are in agreement with the RUC recommendation for CPT code 00797.

(ii) Allergy and Immunology

The Joint Council of Allergy, Asthma, and Immunology (JCAAI) and the American Academy of Otolaryngic Allergy (AAOA) submitted five codes without work relative values for this 5-Year Review based on the rationale that physician work was inherent in the service (see Table 33). The specialties subsequently withdrew CPT codes 95115 and 95117 from consideration.

TABLE 33

CPT code	Description
95004	Percutaneous tests (scratch, puncture, prick) with allergenic extracts, immediate type reaction, specify number of tests.

TABLE 33—Continued

CPT code	Description
95024	Intracutaneous (intradermal) tests with allergenic extracts, immediate type reaction, specify number of tests.
95027	Intracutaneous (intradermal) tests, sequential and incremental, with allergenic extracts for airborne allergens, immediate type reaction, specify number of tests.
95115	Professional services for allergen immunotherapy not including provision of allergenic extracts; single injection.
95117	Professional services for allergen immunotherapy not including provision of allergenic extracts; two or more injections.

In addition, we requested the RUC to review the immunotherapy CPT codes in Table 34 because they had never been reviewed by the RUC. Standard RUC surveys were conducted.

TABLE 34

CPT code	Description
95144	Professional services for the supervision of preparation and provision of antigens for allergen immunotherapy, single dose vial(s) (specify number of vials).
95165	Professional services for the supervision of preparation and provision of antigens for allergen immunotherapy; single or multiple antigens (specify number of doses).

RUC Recommendations

The RUC reviewed the specialty society recommendations, and survey results recommended that CPT codes 95004, 95024, and 95027 be referred to the CPT Editorial Panel for clarification and possible revision. The RUC recommended that the current work RVUs be maintained for CPT codes 95144 and 95165, because there was no compelling evidence for a change. The RUC-recommended work RVUs for these CPT codes are: 95144 = 0.06 work RVUs; and 95165 = 0.06 work RVUs.

CMS Proposed Valuation

We are in agreement with these RUC-recommended work RVUs for allergy and immunology services.

(iii) Pediatric codes

The AAP requested that the RUC review eight pediatric-related CPT codes for this 5-Year Review (see Table 35). However, two of these CPT codes (90473 and 90474) were subsequently withdrawn by AAP. The remaining six codes were referred to the CPT Editorial Panel for review.

TABLE 35

CPT code	Descriptor
54150	Circumcision, using clamp or other device; newborn.
54152	Circumcision, using clamp or other device; except newborn.
90465	Immunization administration under 8 years of age (includes percutaneous, intradermal, subcutaneous, or intramuscular injections) when the physician counsels the patient/family; first injection (single or combination vaccine/toxoid), per day.
90466	Immunization administration under 8 years of age (includes percutaneous, intradermal, subcutaneous, or intramuscular injections) when the physician counsels the patient/family; each additional injection (single or combination vaccine/toxoid), per day (List separately in addition to code for primary procedure).
90467	Immunization administration under age 8 years (includes intranasal or oral routes of administration) when the physician counsels the patient/family; first administration (single or combination vaccine/toxoid), per day.
90468	Immunization administration under age 8 years (includes intranasal or oral routes of administration) when the physician counsels the patient/family; each additional administration (single or combination vaccine/toxoid), per day (List separately in addition to code for primary procedure).
90473	Immunization administration by intranasal or oral route; one vaccine (single or combination vaccine/toxoid).
90474	Immunization administration by intranasal or oral route; each additional vaccine (single or combination vaccine/toxoid) (List separately in addition to code for primary procedure).

(iv) Cardiology-Related Services

We requested that the RUC review five cardiology-related CPT codes (see Table 36). The specialty societies believed that the standard RUC survey results indicated that the work RVUs for each code should be either maintained or decreased from their current level.

TABLE 36

CPT code	Description
33208	Insertion or replacement of permanent pacemaker with transvenous electrode(s); atrial and ventricular.
93010	Electrocardiogram, routine ECG with at least 12 leads; interpretation and report only.
93015	Cardiovascular stress test using maximal or submaximal treadmill or bicycle exercise, continuous electrocardiographic monitoring, and/or pharmacological stress; with physician supervision, with interpretation and report.
93018	Cardiovascular stress test using maximal or submaximal treadmill or bicycle exercise, continuous electrocardiographic monitoring, and/or pharmacological stress; interpretation and report only.

TABLE 36—Continued

CPT code	Description
93325	Doppler echocardiography color flow velocity mapping (List separately in addition to codes for echocardiography).

RUC Recommendations

The RUC reviewed the survey results and found no compelling evidence to change the work RVUs for CPT codes 33208, 93010, 93015, and 93018. However, CPT code 93325 was referred to the CPT Editorial Panel by the RUC with the recommendation that this service be bundled with CPT code 93307, *Echocardiography, transthoracic, real-time with image documentation (2D) with or without M-mode recording; complete.*

The RUC-recommended work RVUs for these CPT codes are as follows: 33208 = 8.12 work RVUs; 93010 = 0.17 work RVUs; 93015 = 0.75 work RVUs; and 93018 = 0.30 work RVUs.

CMS Proposed Valuation

We are in agreement with these RUC-recommended work RVUs for cardiology related services.

5. Evaluation and Management (E/M) Services

[If you choose to comment on issues in this section, please include the caption ''DISCUSSION OF COMMENTS—EVALUATION AND MANAGEMENT SERVICES'' at the beginning of your comments.]

A consortium of 27 organizations submitted a consensus comment letter stating that the work of E/M services has changed significantly since the E/M codes were reviewed during the first 5-Year Review and requested that the E/M codes be reviewed (see Table 37).

In addition, the following specialty societies submitted requests that individual E/M CPT codes be reviewed: The American Academy of Family Physicians (AAFP), the American Medical Directors Association (AMDA), the American Geriatric Society (AGS), the American Association for Geriatric Psychiatry (AAGP), the ASA, and the American Academy of Home Care Physicians (AAHCP).

TABLE 37

CPT code	Descriptor
99201	Office or other outpatient visit for the evaluation and management of a new patient, which requires these three key components: ▪ a problem focused history; ▪ a problem focused examination; ▪ straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor. Physicians typically spend 10 minutes face-to-face with the patient and/or family.
99202	Office or other outpatient visit for the evaluation and management of a new patient, which requires these three key components: ▪ an expanded problem focused history; ▪ an expanded problem focused examination; ▪ straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low to moderate severity. Physicians typically spend 20 minutes face-to-face with the patient and/or family.
99203	Office or other outpatient visit for the evaluation and management of a new patient, which requires these three key components: ▪ a detailed history; ▪ a detailed examination; ▪ medical decision making of low complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity. Physicians typically spend 30 minutes face-to-face with the patient and/or family.
99204	Office or other outpatient visit for the evaluation and management of a new patient, which requires these three key components: ▪ a comprehensive history; ▪ a comprehensive examination; ▪ medical decision making of moderate complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 45 minutes face-to-face with the patient and/or family.

99205	Office or other outpatient visit for the evaluation and management of a new patient, which requires these three key components: ▪ a comprehensive history; ▪ a comprehensive examination; ▪ medical decision making of high complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 60 minutes face-to-face with the patient and/or family.
99211	Office or other outpatient visit for the evaluation and management of an established patient that may not require the presence of a physician. Usually, the presenting problem(s) are minimal. Typically, 5 minutes are spent performing or supervising these services.
99212	Office or other outpatient visit for the evaluation and management of an established patient, which requires at least two of these three key components: ▪ a problem focused history; ▪ a problem focused examination; ▪ straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor. Physicians typically spend 10 minutes face-to-face with the patient and/or family.
99213	Office or other outpatient visit for the evaluation and management of an established patient, which requires at least two of these three key components: ▪ an expanded problem focused history; ▪ an expanded problem focused examination; ▪ medical decision making of low complexity. Counseling and coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low to moderate severity. Physicians typically spend 15 minutes face-to-face with the patient and/or family.

99214	Office or other outpatient visit for the evaluation and management of an established patient, which requires at least two of these three key components: ▪ a detailed history; ▪ a detailed examination; ▪ medical decision making of moderate complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 25 minutes face-to-face with the patient and/or family.
99215	Office or other outpatient visit for the evaluation and management of an established patient, which requires at least two of these three key components: ▪ a comprehensive history; ▪ a comprehensive examination; ▪ medical decision making of high complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 40 minutes face-to-face with the patient and/or family.
99221	Initial hospital care, per day, for the evaluation and management of a patient, which requires these three key components: ▪ a detailed or comprehensive history; ▪ a detailed or comprehensive examination; and ▪ medical decision making that is straightforward or of low complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the problem(s) requiring admission are of low severity. Physicians typically spend 30 minutes at the bedside and on the patient's hospital floor or unit.
99222	Initial hospital care, per day, for the evaluation and management of a patient, which requires these three key components: ▪ a comprehensive history; ▪ a comprehensive examination; and ▪ medical decision making of moderate complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the problem(s) requiring admission are of moderate severity. Physicians typically spend 50 minutes at the bedside and on the patient's hospital floor or unit.

99223	Initial hospital care, per day, for the evaluation and management of a patient, which requires these three key components: ▪ a comprehensive history; ▪ a comprehensive examination; and ▪ medical decision making of high complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the problem(s) requiring admission are of high severity. Physicians typically spend 70 minutes at the bedside and on the patient's hospital floor or unit.
99231	Subsequent hospital care, per day, for the evaluation and management of a patient, which requires at least two of these three key components: ▪ a problem focused interval history; ▪ a problem focused examination; ▪ medical decision making that is straightforward or of low complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the patient is stable, recovering or improving. Physicians typically spend 15 minutes at the bedside and on the patient's hospital floor or unit.
99232	Subsequent hospital care, per day, for the evaluation and management of a patient, which requires at least two of these three key components: ▪ an expanded problem focused interval history; ▪ an expanded problem focused examination; ▪ medical decision making of moderate complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the patient is responding inadequately to therapy or has developed a minor complication. Physicians typically spend 25 minutes at the bedside and on the patient's hospital floor or unit.
99233	Subsequent hospital care, per day, for the evaluation and management of a patient, which requires at least two of these three key components: ▪ a detailed interval history; ▪ a detailed examination; ▪ medical decision making of high complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the patient is unstable or has developed a significant complication or a significant new problem. Physicians typically spend 35 minutes at the bedside and on the patient's hospital floor or unit.

99238	Hospital discharge day management; 30 minutes or less
99239	Hospital discharge day management; more than 30 minutes
99241	Office consultation for a new or established patient, which requires these three key components: ▪ a problem focused history; ▪ problem focused examination; and ▪ straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor. Physicians typically spend 15 minutes face-to-face with the patient and/or family.
99242	Office consultation for a new or established patient, which requires these three key components: ▪ an expanded problem focused history; ▪ an expanded problem focused examination; and ▪ straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low severity. Physicians typically spend 30 minutes face-to-face with the patient and/or family.
99243	Office consultation for a new or established patient, which requires these three key components: ▪ a detailed history; ▪ a detailed examination; and ▪ medical decision making of low complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity. Physicians typically spend 40 minutes face-to-face with the patient and/or family.
99244	Office consultation for a new or established patient, which requires these three key components: ▪ a comprehensive history; ▪ a comprehensive examination; and ▪ medical decision making of moderate complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 60 minutes face-to-face with the patient and/or family.

99245	Office consultation for a new or established patient, which requires these three key components: ▪ a comprehensive history; ▪ a comprehensive examination; and ▪ medical decision making of high complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 80 minutes face-to-face with the patient and/or family.
99251	Initial inpatient consultation for a new or established patient, which requires these three key components: ▪ a problem focused history; ▪ a problem focused examination; and ▪ straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor. Physicians typically spend 20 minutes at the bedside and on the patient's hospital floor or unit.
99252	Initial inpatient consultation for a new or established patient, which requires these three key components: ▪ an expanded problem focused history; ▪ an expanded problem focused examination; and ▪ straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low severity. Physicians typically spend 40 minutes at the bedside and on the patient's hospital floor or unit.
99253	Initial inpatient consultation for a new or established patient, which requires these three key components: ▪ a detailed history; ▪ a detailed examination; and ▪ medical decision making of low complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity. Physicians typically spend 55 minutes at the bedside and on the patient's hospital floor or unit.

99254	Initial inpatient consultation for a new or established patient, which requires these three key components: ▪ a comprehensive history; ▪ a comprehensive examination; and ▪ medical decision making of moderate complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 80 minutes at the bedside and on the patient's hospital floor or unit.
99255	Initial inpatient consultation for a new or established patient, which requires these three key components: ▪ a comprehensive history; ▪ a comprehensive examination; and ▪ medical decision making of high complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 110 minutes at the bedside and on the patient's hospital floor or unit.
99281	Emergency department visit for the evaluation and management of a patient, which requires these three key components: ▪ a problem focused history; ▪ a problem focused examination; and ▪ straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor.
99282	Emergency department visit for the evaluation and management of a patient, which requires these three key components: ▪ an expanded problem focused history; ▪ an expanded problem focused examination; and ▪ medical decision making of low complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low to moderate severity.

99283	Emergency department visit for the evaluation and management of a patient, which requires these three key components: ▪ an expanded problem focused history; ▪ an expanded problem focused examination; and ▪ medical decision making of moderate complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity.
99284	Emergency department visit for the evaluation and management of a patient, which requires these three key components: ▪ a detailed history; ▪ a detailed examination; and ▪ medical decision making of moderate complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of high severity, and require urgent evaluation by the physician but do not pose an immediate significant threat to life or physiologic function.
99285	Emergency department visits for the evaluation and management of a patient, which requires these three key components within the constraints imposed by the urgency of the patient's clinical condition and/or mental status: ▪ a comprehensive history; ▪ a comprehensive examination; and ▪ medical decision making of high complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of high severity and pose an immediate significant threat to life or physiologic function.
99291	Critical care, evaluation and management of the critically ill or critically injured patient; first 30-74 minutes
99292	Critical care, evaluation and management of the critically ill or critically injured patient; each additional 30 minutes (List separately in addition to code for primary service)

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Standard RUC surveys of the E/M services were conducted by a coalition of medical specialty societies. Recommendations of the coalition, as well as comments from the coalition of surgical specialties, were considered by the RUC workgroup.

RUC Recommendations

The RUC E/M workgroup conferred via conference call throughout the summer of 2005 and reviewed previous studies and methodologies used to evaluate the physician work related to the E/M services. At the first meeting in August of 2005, the workgroup considered the recommendations of the coalition of medical specialty societies, as well as the comments of the coalition of surgical specialties that countered the arguments presented regarding increased physician work. After extensive discussion, the workgroup agreed that there was evidence that incorrect assumptions were made in the previous valuation of these services. The workgroup reviewed each E/M code extensively, reviewing the survey from the coalition of medical specialties, comparing the codes to reference codes and considering comments from the surgical coalition and other meeting attendees.

At the RUC meeting in October 2005, the RUC agreed that there was compelling evidence to review the E/M services because of evidence that incorrect assumptions were made in the previous valuation of the services. The RUC approved final recommendations for 26 of these codes, interim recommendations for six codes (CPT codes 99222, 99223, 99232, 99233, 99291, and 99292) and postponed the review of three codes (CPT codes 99213, 99214, and 99215) to the February 2006 meeting.

At the February 2006 meeting, the RUC reached consensus on the recommended work values for all the

outstanding E/M codes. As an example of the RUC review process, we are including the RUC notes on the rationale used to recommend a revised work value for CPT code 99213, the mid-level office visit, which is also the most frequently billed code in the PFS:

''The RUC agreed that the compelling evidence to review CPT code 99213 is that incorrect assumptions were made in the previous valuation of CPT code 99213 (that is, the assumptions made by Harvard and CMS are flawed). The RUC extensively discussed CPT code 99213 (physician time: pre- = 3, intra- = 15, and post- = 5) and agreed that this code is slightly more work than CPT code 99202 (recommended work RVU = 0.88; physician time: pre- = 2, intra- = 15, and post- = 5). It was noted the content for CPT code 99213 represents a higher level of intensity as the medical decision making is ''low'' for CPT code 99213, versus ''straightforward'' for CPT code 99202. CMS also provided utilization data that indicated that diagnosis and number of diagnosis were more significant for CPT code 99213 than CPT code 99202. Finally, the survey respondents agreed with this relationship, as the survey median work RVU for ''all'' survey respondents was 1.10 for CPT code 99213 and 1.05 for CPT code 99202. Utilizing this relationship and the recommended work RVU of 0.88 for CPT code 99202, the RUC determined that a work RVU of 0.92 for CPT code 99213 is appropriate. In addition, the RUC agreed that CPT code 99213 is similar in work to CPT code 93307 *Echocardiography, transthoracic, real-time with image documentation (2D) with or without M-mode recording; complete* (work RVU = 0.92, physician time: pre- = 5, intra- = 18, and post- = 5), which is a code included on the RUC's Multi-Specialty Points of Comparison (MPC). It was also noted that the 25th percentile of the 'all' survey respondent, weighted survey data was 0.95 RVUs. The RUC recommends a work RVU of 0.92 for CPT code 99213 (physician time: pre- = 3, intra- = 15, and post- = 5).''

The RUC also recommended that the full increase for these codes be incorporated into the surgical global periods for each CPT code with a global period of 010 and 090.

Based on a review of the survey information, the RUC recommended that the work RVUs for the following CPT codes be maintained: 99201 = 0.45 work RVUs; 99202 = 0.88 work RVUs; 99203 = 1.34 work RVUs; 99211 = 0.17 work RVUs; 99212 = 0.45 work RVUs; 99238 = 1.28 work RVUs; and 99241 = 0.64 work RVUs.

The RUC also recommended that the work RVUs for the following CPT codes be increased: 99204 = 2.30 work RVUs; 99205 = 3.00 work RVUs; 99213 = 0.92 work RVUs; 99214 = 1.42 work RVUs; 99215 = 2.00 work RVUs; 99221 = 1.88 work RVUs; 99222 = 2.56 work RVUs; 99223 = 3.78 work RVUs; 99231 = 0.76 work RVUs; 99232 = 1.39 work RVUs; 99233 = 2.00 work RVUs; 99239 = 1.90 work RVUs; 99242 = 1.34 work RVUs; 99243 = 1.88 work RVUs; 99244 = 3.02 work RVUs; 99245 = 3.77 work RVUs; 99251 = 1.00 work RVUs; 99252 = 1.50 work RVUs; 99253 = 2.27 work RVUs; 99254 = 3.29 work RVUs; 99255 = 4.00 work RVUs; 99281 = 0.45 work RVUs; 99282 = 0.88 work RVUs; 99283 = 1.34 work RVUs; 99284 = 2.56 work RVUs; 99285 = 3.80 work RVUs; 99291 = 4.50 work RVUs; and 99292 = 2.25 work RVUs.

The RUC also noted that twelve E/M codes (nursing facility and domiciliary care) originally submitted had been deleted by CPT and replaced by new CPT codes that were reviewed by the RUC last year. These new CPT codes were included in the CY 2006 PFS final rule with comment period (70 FR 70116) and the associated RVUs were considered interim and subject to comment. Therefore, these new CPT codes were not included as part of the 5-Year Review.

CMS Proposed Valuation

We are in agreement with these RUC recommended work RVUs for E/M services. We also agree with the recommendation that the full increase for these codes should be incorporated into the surgical global periods for each CPT code with a global period of 010 and 090.

6. Cardiothoracic Surgery

[If you choose to comment on issues in this section, please include the caption ''DISCUSSION OF COMMENTS—CARDIOTHORACIC SURGERY'' at the beginning of your comments.]

a. Congenital Codes

The STS/ American Association for Thoracic Surgery (AATS) submitted the congenital cardiac surgical CPT codes for review (see Table 38).

TABLE 38

CPT code	Descriptor
33414	Repair of left ventricular outflow tract obstruction by patch enlargement of the outflow tract.
33416	Ventriculomyotomy (-myectomy) for idiopathic hypertrophic subaortic stenosis (e.g., asymmetric septal hypertrophy).
33505	Repair of anomalous coronary artery from pulmonary artery origin; with construction of intrapulmonary artery tunnel (Takeuchi procedure).
33665	Repair of intermediate or transitional atrioventricular canal, with or without atrioventricular valve repair.
33684	Closure of ventricular septal defect, with or without patch; with pulmonary valvotomy or infundibular resection (acyanotic).
33688	Closure of ventricular septal defect, with or without patch; with removal of pulmonary artery band, with or without gusset.
33771	Repair of transposition of the great arteries with ventricular septal defect and subpulmonary stenosis; with surgical enlargement of ventricular septal defect.
33779	Repair of transposition of the great arteries, aortic pulmonary artery reconstruction (e.g., Jatene type); with removal of pulmonary band.
33781	Repair of transposition of the great arteries, aortic pulmonary artery reconstruction (e.g., Jatene type); with repair of subpulmonic obstruction.

The commenters stated that at the second 5-Year Review, many of the more common congenital cardiac surgical codes were reviewed, and the values were adjusted. However, at that time, these much less commonly performed congenital cardiac surgical codes were not surveyed due to resource and time constraints. The commenter believed that this has created rank order anomalies within these families of codes.

Standard RUC surveys were conducted for the services in Table 38. However, there was a low response rate that was attributable to these procedures being infrequently performed by a small number of surgeons.

RUC Recommendations

The RUC believed that the current work RVUs for the codes presented created rank order anomalies in terms of the physician work relative value, but, during the review, the RUC agreed that a number of the reference procedures had inaccurate physician times. When the reference code times were compared

with the surveyed times for the codes under review, the RUC noted inconsistencies in all time segments, including intra-service time. The RUC reviewed the survey data and the data for the reference codes, and made recommendations for work RVUs to place the surveyed codes in proper rank order. Recommendations for work RVUs reflected the survey's 25th percentile, the median survey value, or the time-adjusted survey data, which was based on time adjustments for certain portions of the service when compared to the reference codes. Due to concern about the accuracy of time for some of the reference codes, the RUC also recommended that the specialty society conduct future surveys for physician time only for CPT codes 33660, 33670, 33506, 33770, and 33780. However, the RUC agreed that the new 5-Year Review values and times could not be used to justify changes in the relative values of the reference services.

The RUC-recommended work RVUs for these CPT codes are as follows: 33414 = 36.52 work RVUs; 33416 = 34.25 work RVUs; 33505 = 36.00 work RVUs; 33665 = 32.98 work RVUs; 33684 = 32.50 work RVUs; 33688 = 32.88 work RVUs; 33771 = 38.50 work RVUs; 33779 = 41.00 work RVUs; and 33781 = 41.00 work RVUs.

b. Adult Cardiac and General Thoracic Codes

The STS/ATTS submitted 46 adult cardiac CPT codes for review and 27 general thoracic CPT codes for review but subsequently withdrew two CPT codes (32095 and 35600). The specialty believed many of these CPT codes needed to be reviewed due to the rank order anomalies that exist in these families of CPT codes (see Table 39).

We submitted two CPT codes for review, 32020 and 39400; however, no specialty expressed an interest in conducting a survey for CPT code 32020 so there was no RUC recommendation forwarded for this service. (See Table 39 for all codes submitted.)

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TABLE 39:

GENERAL		ADULT	
CPT code	Descriptor	CPT code	Descriptor
32020	Tube thoracostomy with or without water seal (eg, for abscess, hemothorax, empyema) (separate procedure)	33140	Transmyocardial laser revascularization, by thoracotomy; (separate procedure)
32095	Thoracotomy, limited, for biopsy of lung or pleura	33141	Transmyocardial laser revascularization, by thoracotomy; performed at the time of other open cardiac procedure(s) (List separately in addition to code for primary procedure)
32141	Thoracotomy, major; with excision-plication of bullae, with or without any pleural procedure	33300	Repair of cardiac wound; without bypass
32442	Removal of lung, total pneumonectomy; with resection of segment of trachea followed by broncho-tracheal anastomosis (sleeve pneumonectomy)	33305	Repair of cardiac wound; with cardiopulmonary bypass
32445	Removal of lung, total pneumonectomy; extrapleural	33400	Valvuloplasty, aortic valve; open, with cardiopulmonary bypass
32484	Removal of lung, other than total pneumonectomy; single segment (segmentectomy)	33405	Replacement, aortic valve, with cardiopulmonary bypass; with prosthetic valve other than homograft or stentless valve
32486	Removal of lung, other than total pneumonectomy; with circumferential resection of segment of bronchus followed by broncho-bronchial anastomosis (sleeve lobectomy)	33406	Replacement, aortic valve, with cardiopulmonary bypass; with allograft valve (freehand)
32488	Removal of lung, other than total pneumonectomy; all remaining lung following previous removal of a portion of lung (completion pneumonectomy)	33410	Replacement, aortic valve, with cardiopulmonary bypass; with stentless tissue valve
32540	Extrapleural enucleation of empyema (empyemectomy)	33411	Replacement, aortic valve; with aortic annulus enlargement, noncoronary cusp
32651	Thoracoscopy, surgical; with partial pulmonary decortication	33413	Replacement, aortic valve; by translocation of autologous pulmonary valve with allograft replacement of pulmonary valve (Ross procedure)
32652	Thoracoscopy, surgical; with total pulmonary decortication, including intrapleural pneumonolysis	33415	Resection or incision of subvalvular tissue for discrete subvalvular aortic stenosis
32653	Thoracoscopy, surgical; with removal of intrapleural foreign body or fibrin deposit	33425	Valvuloplasty, mitral valve, with cardiopulmonary bypass;

GENERAL		ADULT	
CPT code	Descriptor	CPT code	Descriptor
32654	Thoracoscopy, surgical; with control of traumatic hemorrhage	33426	Valvuloplasty, mitral valve, with cardiopulmonary bypass; with prosthetic ring
32655	Thoracoscopy, surgical; with excision-plication of bullae, including any pleural procedure	33427	Valvuloplasty, mitral valve, with cardiopulmonary bypass; radical reconstruction, with or without ring
32657	Thoracoscopy, surgical; with wedge resection of lung, single or multiple	33430	Replacement, mitral valve, with cardiopulmonary bypass
32662	Thoracoscopy, surgical; with excision of mediastinal cyst, tumor, or mass	33460	Valvectomy, tricuspid valve, with cardiopulmonary bypass
32663	Thoracoscopy, surgical; with lobectomy, total or segmental	33463	Valvuloplasty, tricuspid valve; without ring insertion
32665	Thoracoscopy, surgical; with esophagomyotomy (Heller type)	33464	Valvuloplasty, tricuspid valve; with ring insertion
32815	Open closure of major bronchial fistula	33465	Replacement, tricuspid valve, with cardiopulmonary bypass
39220	Excision of mediastinal tumor	33474	Valvotomy, pulmonary valve, open heart; with cardiopulmonary bypass
39400	Mediastinoscopy, with or without biopsy	33475	Replacement, pulmonary valve
43108	Total or near total esophagectomy, without thoracotomy; with colon interposition or small intestine reconstruction, including intestine mobilization, preparation and anastomosis(es)	33510	Coronary artery bypass, vein only; single coronary venous graft
43113	Total or near total esophagectomy, with thoracotomy; with colon interposition or small intestine reconstruction, including intestine mobilization, preparation, and anastomosis(es)	33511	Coronary artery bypass, vein only; two coronary venous grafts
43116	Partial esophagectomy, cervical, with free intestinal graft, including microvascular anastomosis, obtaining the graft and intestinal reconstruction	33512	Coronary artery bypass, vein only; three coronary venous grafts

GENERAL		ADULT	
CPT code	Descriptor	CPT code	Descriptor
43118	Partial esophagectomy, distal two-thirds, with thoracotomy and separate abdominal incision, with or without proximal gastrectomy; with colon interposition or small intestine reconstruction, including intestine mobilization, preparation, and anastomosis(es)	33513	Coronary artery bypass, vein only; four coronary venous grafts
43121	Partial esophagectomy, distal two-thirds, with thoracotomy only, with or without proximal gastrectomy, with thoracic esophagogastrostomy, with or without pyloroplasty	33514	Coronary artery bypass, vein only; five coronary venous grafts
43123	Partial esophagectomy, thoracoabdominal or abdominal approach, with or without proximal gastrectomy; with colon interposition or small intestine reconstruction, including intestine mobilization, preparation, and anastomosis(es)	33516	Coronary artery bypass, vein only; six or more coronary venous grafts
43124	Total or partial esophagectomy, without reconstruction (any approach), with cervical esophagostomy	33517	Coronary artery bypass, using venous graft(s) and arterial graft(s); single vein graft (List separately in addition to code for arterial graft)
43135	Diverticulectomy of hypopharynx or esophagus, with or without myotomy; thoracic approach	33518	Coronary artery bypass, using venous graft(s) and arterial graft(s); two venous grafts (List separately in addition to code for arterial graft)
		33519	Coronary artery bypass, using venous graft(s) and arterial graft(s); three venous grafts (List separately in addition to code for arterial graft)
		33521	Coronary artery bypass, using venous graft(s) and arterial graft(s); four venous grafts (List separately in addition to code for arterial graft)

GENERAL		ADULT	
CPT code	Descriptor	CPT code	Descriptor
		33522	Coronary artery bypass, using venous graft(s) and arterial graft(s); five venous grafts (List separately in addition to code for arterial graft)
		33523	Coronary artery bypass, using venous graft(s) and arterial graft(s); six or more venous grafts (List separately in addition to code for arterial graft)
		33530	Reoperation, coronary artery bypass procedure or valve procedure, more than one month after original operation (List separately in addition to code for primary procedure)
		33533	Coronary artery bypass, using arterial graft(s); single arterial graft
		33534	Coronary artery bypass, using arterial graft(s); two coronary arterial grafts
		33535	Coronary artery bypass, using arterial graft(s); three coronary arterial grafts
		33536	Coronary artery bypass, using arterial graft(s); four or more coronary arterial grafts
		33542	Myocardial resection (eg, ventricular aneurysmectomy)
		33545	Repair of postinfarction ventricular septal defect, with or without myocardial resection
		33641	Repair atrial septal defect, secundum, with cardiopulmonary bypass, with or without patch
		33860	Ascending aorta graft, with cardiopulmonary bypass, with or without valve suspension;
		33863	Ascending aorta graft, with cardiopulmonary bypass, with or without valve suspension; with aortic root replacement using composite prosthesis and coronary reconstruction
		33945	Heart transplant, with or without recipient cardiectomy
		35600	Harvest of upper extremity artery, one segment, for coronary bypass procedure
		35820	Exploration for postoperative hemorrhage, thrombosis or infection; chest

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The RUC had previously approved a building-block methodology based on the STS database, which would provide a mean intra-service time for the adult cardiac and general thoracic codes, as well as the procedure-specific length of stay. Two intensity surveys were also conducted and the final recommended intensity was an average of the two survey results. The remaining pre-service and post-service inputs were derived through a panel of cardiac surgeons.

The add-on CPT codes (33141, 33517 through 33523 and 33530) were evaluated by subtracting the time data for the base code from the time data for the combined base and add-on codes, with the results weighted for frequency of occurrence.

RUC Recommendations

The RUC workgroup reviewed the data elements for each code on a code-by-code basis. Most of the discussion focused on the number and level of post-operative visits, as well as the pre-service time. For the adult cardiac and general thoracic codes, the RUC agreed that the pre-service time was overstated and needed to reflect previously approved RUC pre-service times. Also, the RUC questioned the total times allocated to the codes when compared to a normal surgical work week. The workgroup developed a pre-service time standard that was used for a majority of the codes. This standard consisted of 60 minutes for evaluation, 15 minutes for positioning, and 20 minutes for scrub dress and wait time. For emergent procedures, the pre-service times were set at 10 minutes for evaluation, 12 minutes for positioning, and 15 minutes for scrub dress and wait time. The immediate post-service time was examined in conjunction with other visits on the same day of surgery. For most of the codes, the immediate post-service time was standardized at 40 minutes.

The intra-service times were derived from the STS database with mean times used for the adult cardiac codes and median times for the general thoracic codes. Because the general thoracic codes have a much lower number of cases in the database, the STS believed that the median was more appropriate. The RUC agreed with the specialty society that critical care visits should be used in the STS building-block methodology for all of the adult cardiac codes and for 13 of the general thoracic codes.

The assignment of the level of critical care services was recommended for each code based on the STS panel's knowledge and experience in caring for these patients, within the framework of the duration of mechanical ventilation and the length of intensive care unit (ICU) stay provided by appropriate data in the STS database. The RUC also made changes to the hospital visits on a line-by-line basis, but used the STS length of stay data as a guide. Generally, the level of hospital visits was reduced so that the total number of visits equaled the length of stay. On the day of discharge, the RUC assigned a discharge day management code as the only service provided on that day.

During the review of various cardiothoracic surgery procedures, the RUC determined that several of the reference service codes used in the analysis of surveyed codes (specifically, CPT codes 33506, 33660, 33670, 33770 and 33780) had inaccurate physician times associated with them. The RUC instructed the specialty society to conduct a survey of time for these reference codes; however, these times could not be used to justify new relative values.

The RUC recommended work RVUs for these CPT codes were as follows:

General Thoracic codes: 32141 = 23.90 work RVUs; 32442 = 51.45 work RVUs; 32445 = 57.74 work RVUs; 32484= 23.25 work RVUs; 32486 = 39.44 work RVUs; 32488 = 38.95 work RVUs; 32540 = 26.42 work RVUs; 32651 = 16.64 work RVUs; 32652 = 26.35 work RVUs; 32653 = 16.24 work RVUs; 32654 = 17.73 work RVUs; 32655 = 14.69 work RVUs; 32657 = 11.90 work RVUs; 32662 = 14.29 work RVUs; 32663 = 23.00 work RVUs; 32665 = 19.56 work RVUs; 32815 = 42.94 work RVUs; 39220 = 18.40 work RVUs; 39400 = 7.61 work RVUs; 43108 = 76.55 work RVUs; 43113 = 73.23 work RVUs; 43116 = 87.16 work RVUs; 43118 = 61.08 work RVUs; 43121 = 46.59 work RVUs; 43123 = 76.14 work RVUs; 43124 = 60.61 work RVUs; 43135 = 24.20 work RVUs. As noted above in this section, there was no RUC recommendation forwarded for CPT code 32020.

Adult Cardiac codes: 33140 = 25.49 work RVUs; 33141 = 2.43 work RVUs; 33300 = 40.03 work RVUs; 33305 = 70.21 work RVUs; 33400 = 38.33 work RVUs; 33405 = 37.82 work RVUs; 33406 = 49.18 work RVUs; 33410 = 42.91 work RVUs; 33411 = 56.91 work RVUs; 33413 = 56.19 work RVUs; 33415 = 34.58 work RVUs; 33425 = 45.97 work RVUs; 33426 = 39.78 work RVUs; 33427 = 41.82 work RVUs; 33430 = 46.45 work RVUs; 33460 = 40.19 work RVUs; 33463 = 50.93 work RVUs; 33464 = 40.30 work RVUs; 33465 = 45.72 work RVUs; 33474 = 36.39 work RVUs; 33475 = 39.39 work RVUs; 33510 = 31.75 work RVUs; 33511 = 35.22 work RVUs; 33512 = 40.26 work RVUs; 33513 = 41.65 work RVUs; 33514 = 44.36 work RVUs; 33516 = 46.04 work RVUs; 33517 = 3.36 work RVUs; 33518 = 7.41 work RVUs; 33519 = 9.91 work RVUs; 33521 = 12.01 work RVUs; 33522 = 13.53 work RVUs; 33523 = 15.39 work RVUs; 33530 = 9.78 work RVUs; 33533 = 30.85 work RVUs; 33534 = 36.98 work RVUs; 33535 = 41.85 work RVUs; 33536 = 45.53 work RVUs; 33542 = 44.20 work RVUs; 33545 = 52.49 work RVUs; 33641 = 27.71 work RVUs; 33860 = 55.45 work RVUs; 33863 = 55.10 work RVUs; 33945 = 80.84 work RVUs; and 35820 = 32.24 work RVUs.

CMS Proposed Valuation

We are in agreement with the RUC-recommended work RVUs for the congenital cardiac surgery services.

As mentioned above, the general thoracic and adult cardiac surgery codes submitted to the RUC for review did not undergo the standard RUC survey methodology. Rather, the data pertaining to these codes were derived from the STS database, a voluntary registry developed by the STS that has reportedly captured data on approximately 70 percent of all cardiac surgical procedures in the United States.

We believe that the STS database, which also captures outcomes data, is a significant tool in the effort to improve the quality of patient care and we hope that this kind of data collection will be emulated by other specialties. We also believe that the time and visit data contained in this database could be a useful adjunct to the RUC's validation of the standard RUC survey results. However, we have significant concerns with its use as a tool to derive work RVUs without reference to a standard RUC survey. We have questions regarding the representativeness of the data in the STS database because it is unclear what percentage of the patients in the database is derived from academic medical centers versus community hospitals or whether the cases are selectively reported (for example, does the case mix contain a disproportionate number of complex cases?) We also would like information regarding the type of hospitals that chose not to participate in the database. Additionally, while we recognize this database has collected large numbers of cases for cardiac services, the database was not robust for the non-cardiac thoracic service.

In addition, we would also want to know the median values, as well as the mean values, for the intra-service time for the adult cardiac services because the RUC's standard methodology is based on median values. Therefore, we are concerned about maintaining the relativity between these services and those where the median values were

used to recommend the work RVUs. We also believe the median is a better estimate of central tendency when more extreme cases occur in either direction.

However, our main concern is not with the time data itself, but rather with how these data were translated into work RVUs because work RVUs are not calculated solely on the basis of the time it takes to perform a given procedure. The other equally important variable is the intensity of the procedure, which is a measure of the technical skill, mental effort, and psychological stress involved in performing the procedure. The standard RUC survey captures these data by comparisons to the key reference procedure, asking the responders to rate both the surveyed and reference codes on the specific intensity measures, using a scale of one to five.

The presenting specialties used an entirely different methodology to arrive at their intensity measures by estimating the IWPUT of each service. The presenters stated that the IWPUT was estimated using two methods: IWPUT magnitude estimation and RASCH paired analysis for each code. According to the presenters, the IWPUT magnitude estimation produced direct IWPUT values and the RASCH analysis produced arbitrary scalar values as estimates of CPT code intensity rank and dispersion. These values were converted to IWPUT values by regression of the results to obtain slope, and offset of the results was based on the median value of the magnitude estimation survey. Each RASCH scalar was then converted to IWPUT with the formula $y = mx + b$ where m is the slope and b is the y-intercept.

Though we appreciate the effort that went into such a method, we have several concerns with this approach: (1) We do not believe that the RASCH paired analysis methodology has been approved by the RUC, and has certainly not yet been accepted by CMS as a method for calculating the intensity of a service; (2) we also would want to know more about the surveys themselves, as well as the instructions to the surveyees, before agreeing to any work RVUs based on this method; and (3) we are concerned that the relativity of the fee schedule could be compromised by using such a different method to determine the work relative values of a small number of codes because current work RVUs for other services are not based on this methodology. In addition, we have a further concern regarding the appropriate relativity of the RUC recommendations for these thoracic and cardiac procedures. If we assume the times in the STS database are accurate, by comparing the intra-service times in the STS database to the median times from the surveys done in 2000 for these codes, it appears that surgeons might often underestimate the time spent in the intra-service period. If this is actually the case here, then this could also be true for other services that would not have the benefit of this database. The acceptance of the work RVUs derived by this methodology could then produce rank order anomalies with codes done by other specialties and the relativity of the fee schedule could be compromised by the selective use of this database.

We would not want to see the RUC abandon its survey methodology, unless a better approach can be found that can be applied to all services. We understand that the standard RUC survey process is not perfect, but it does provide an even playing field for all specialties and we would be concerned if each specialty was allowed to develop its own unique method for estimating work RVUs. Therefore, we would recommend that the RUC review this issue again to determine the appropriate use of data sources other than the RUC survey.

It is our responsibility to assure all medical specialties that we will review and evaluate their services using an approach that is accepted by the AMA and CMS. However, we do not know how to use this STS data to compare the relativity of these thoracic and cardiac surgery services to services of similar intensity in other clinical areas. Therefore, we are proposing not to accept the RUC work RVU recommendations for these codes. Because the RUC did approve the use of the STS database and the specialty societies put forth a substantial effort to present their data to the RUC, based on that approval, we also do not think it would be appropriate to propose maintaining the current values.

We believe the standard RUC survey process used to evaluate the cardiac surgery codes during the second 5-Year Review had the correct incremental increase in work RVUs between codes, as well as the appropriate intensity for each code. We have calculated the IWPUT for the current values for all of the cardiac codes submitted for review (excluding the add-on codes discussed below) and multiplied the IWPUT of each code with the time proposed for that code to yield a new RVU for that service. We also calculated an IWPUT for the thoracic codes using the current values. Because we do not have survey data, we believe this is a fair way to value the proposed codes while maintaining the incremental increase between codes. We look forward to comments on this issue and would be willing to consider future RUC recommendations if the specialty societies wish to submit standard RUC surveys for these codes.

CPT codes 33517, 33518, 33519, 33521, 33522, and 33523 are coronary surgery bypass codes using venous grafts and arterial grafts. These are add-on codes used in conjunction with the primary code, a coronary arterial graft. Add-on codes reflect the additional intra-service time required to perform the additional venous anastomoses. These codes do not contain post-service time, critical care time, or hospital care. When presented to the RUC, this series of codes had critical care time and inpatient hospital care time added to the total value of the code. We will maintain the current RVU valuation for CPT codes 33517, 33518, 33519, 33521, 33522, and 33523.

Therefore, the proposed work RVUs for these CPT codes are as follows: 32141 = 13.98 work RVUs; 32442 = 32.86 work RVUs; 32445 = 34.95 work RVUs; 32484 = 20.66 work RVUs; 32486 = 28.40 work RVUs; 32488 = 28.87 work RVUs; 32540 = 19.94 work RVUs; 32651 = 14.26 work RVUs; 32652 = 20.75 work RVUs; 32653 = 18.05 work RVUs; 32654 = 15.82 work RVUs; 32655 = 13.59 work RVUs; 32657 = 13.63 work RVUs; 32662 = 16.42 work RVUs; 32663 = 18.44 work RVUs; 32665 = 15.52 work RVUs; 32815 = 31.17 work RVUs; 33140 = 19.97 work RVUs; 33141 = 4.83 work RVUs; 33300 = 25.09 work RVUs; 33305 = 27.05 work RVUs; 33400 = 36.23 work RVUs; 33405 = 36.64 work RVUs; 33406 = 45.54 work RVUs; 33410 = 35.36 work RVUs; 33411 = 52.12 work RVUs; 33413 = 51.76 work RVUs; 33414 = 36.52 work RVUs; 33415 = 27.11 work RVUs; 33416 = 34.25 work RVUs; 33425 = 34.55 work RVUs; 33426 = 37.95 work RVUs; 33427 = 39.94 work RVUs; 33430 = 45.57 work RVUs; 33460 = 23.56 work RVUs; 33463 = 36.59 work RVUs; 33464 = 26.78 work RVUs; 33465 = 28.75 work RVUs; 33474 = 23.01 work RVUs; 33475 = 41.97 work RVUs; 33505 = 36.00 work RVUs; 33510 = 30.37 work RVUs; 33511 = 31.51 work RVUs; 33512 = 35.16 work RVUs; 33513 = 36.12 work RVUs; 33514 = 36.93 work RVUs; 33516 = 38.39 work RVUs; 33517 = 2.57 work RVUs; 33518 = 4.84 work RVUs; 33519 = 7.11 work RVUs; 33521 = 9.39 work RVUs; 33522 = 11.65 work RVUs; 33523 = 13.93 work RVUs; 33530 = 5.85 work RVUs; 33533 = 34.63 work RVUs; 33534 = 36.06 work RVUs; 33535 = 38.73 work RVUs; 33536 = 38.04 work RVUs; 33542 = 28.81 work RVUs; 33545 = 36.72 work RVUs; 33641 = 26.70 work RVUs; 33665 = 32.98 work RVUs; 33684 = 32.50 work

RVUs; 33688 = 32.88 work RVUs; 33771 = 38.50 work RVUs; 33779 = 41.00 work RVUs; 33781 = 41.00 work RVUs; 33860= 39.29 work RVUs; 33863 = 44.93 work RVUs; 33945 = 42.04 work RVUs; 35820 = 25.53 work RVUs; 39220 = 17.39 work RVUs; 39400 = 5.60 work RVUs; 43108 = 57.20 work RVUs; 43113 = 40.41 work RVUs; 43116 = 65.85 work RVUs; 43118 = 46.37 work RVUs; 43121 = 41.80 work RVUs; 43123 = 57.14 work RVUs; 43124 = 56.51 work RVUs; and 43135 = 20.52 work RVUs.

For CPT code 32020, *Tube thoracostomy with or without water seal (e.g., for abscess, hemothorax, empyema)(separate procedure),* although there was no RUC recommendation provided due to the lack of a level interest for surveying this code, we continue to believe that this service is misvalued. This code was presented to the RUC during the two previous 5-Year Reviews. Based on a lack of compelling evidence, the RUC recommended maintaining the work RVUs, and we accepted this recommendation. However, we believe that since valuation of this CPT code continues to be based on Harvard time data, changes in practice and technology have not been incorporated, leading to an overvaluation of this service. The Harvard time data for this service includes: Pre-service time of 46 minutes, intra-service time of 24 minutes, post-service time of 25 minutes, 9 minutes for ICU time, 15 minutes for hospital days, and 2 minutes for office visits for a total time of 121 minutes. We believe that CPT code 32020 is comparable to CPT code 38300, *Drainage of lymph node abscess or lymphadenitis; simple,* or CPT code 38500, *Biopsy or excision of lymph node(s); open, superficial.* Both of these CPT codes were reviewed by the RUC during the second 5-Year Review. The RUC times for CPT code 38500 are: pre-service time of 35 minutes, intra-service time of 30 minutes and post-service time of 15 minutes, for a total time of 80 minutes, this includes one outpatient visit resulting in a work RVU of 3.74. If the value of the outpatient visit is removed from CPT code 38500, this results in an RVU of 3.29. We believe CPT code 32020 compares favorably to 38500 and propose a work RVU of 3.29 for CPT code 32020.

7. General, Colorectal and Vascular Surgery

[If you choose to comment on issues in this section, please include the caption ''DISCUSSION OF COMMENTS—GENERAL, COLORECTAL AND VASCULAR SURGERY'' at the beginning of your comments.]

a. General Surgery

The American College of Surgeons (ACS) submitted the following CPT codes in Table 40 for review.

TABLE 40

CPT code	Descriptor
38100	Splenectomy; total (separate procedure).
38101	Splenectomy; partial (separate procedure).
38115	Repair of ruptured spleen (splenorrhaphy) with or without partial splenectomy.
43620	Gastrectomy, total; with esophagoenterostomy.
43621	Gastrectomy, total; with Roux-en-Y reconstruction.
43622	Gastrectomy, total; with formation of intestinal pouch, any type.
43632	Gastrectomy, partial, distal; with gastrojejunostomy.
43633	Gastrectomy, partial, distal; with Roux-en-Y reconstruction.
43634	Gastrectomy, partial, distal; with formation of intestinal pouch.
43820	Gastrojejunostomy; without vagotomy.
43840	Gastrorrhaphy, suture of perforated duodenal or gastric ulcer, wound, or injury.
44120	Enterectomy, resection of small intestine; single resection and anastomosis.
44130	Enteroenterostomy, anastomosis of intestine, with or without cutaneous enterostomy (separate procedure).
44143	Colectomy, partial; with end colostomy and closure of distal segment (Hartmann type procedure).
44602	Suture of small intestine (enterorrhaphy) for perforated ulcer, diverticulum, wound, injury or rupture; single perforation.
44603	Suture of small intestine (enterorrhaphy) for perforated ulcer, diverticulum, wound, injury or rupture; multiple perforations.
44604	Suture of large intestine (colorrhaphy) for perforated ulcer, diverticulum, wound, injury or rupture (single or multiple perforations); without colostomy.
44605	Suture of large intestine (colorrhaphy) for perforated ulcer, diverticulum, wound, injury or rupture (single or multiple perforations); with colostomy.
47480	Cholecystotomy or cholecystostomy with exploration, drainage, or removal of calculus (separate procedure).
47490	Percutaneous cholecystostomy.
47510	Introduction of percutaneous transhepatic catheter for biliary drainage.
47511	Introduction of percutaneous transhepatic stent for internal and external biliary drainage.
47525	Change of percutaneous biliary drainage catheter.
47530	Revision and/or reinsertion of transhepatic tube.
47760	Anastomosis, of extrahepatic biliary ducts and gastrointestinal tract.
47765	Anastomosis, of intrahepatic ducts and gastrointestinal tract.
47780	Anastomosis, Roux-en-Y, of extrahepatic biliary ducts and gastrointestinal tract.
47785	Anastomosis, Roux-en-Y, of intrahepatic biliary ducts and gastrointestinal tract.
49000	Exploratory laparotomy, exploratory celiotomy with or without biopsy(s) (separate procedure).
49002	Reopening of recent laparotomy.
49010	Exploration, retroperitoneal area with or without biopsy(s) (separate procedure).

In addition, the American Society of Colon and Rectal Surgeons (ASCRS) submitted six CPT codes for review (see Table 41).

TABLE 41

CPT code	Descriptor
44150	Colectomy, total, abdominal, without proctectomy; with ileostomy or ileoproctostomy.
44151	Colectomy, total, abdominal, without proctectomy; with continent ileostomy.
44152	Colectomy, total, abdominal, without proctectomy; with rectal mucosectomy, ileoanal anastomosis, with or without loop ileostomy.
44153	Colectomy, total, abdominal, without proctectomy; with rectal mucosectomy, ileoanal anastomosis, creation of ileal reservoir (S or J), with or without loop ileostomy.
44155	Colectomy, total, abdominal, with proctectomy; with ileostomy.
44156	Colectomy, total, abdominal, with proctectomy; with continent ileostomy.

We submitted the CPT codes in Table 42 for review.

TABLE 42

CPT code	Descriptor
19180	Mastectomy, simple, complete.
44140	Colectomy, partial; with anastomosis.
47562	Laparoscopy, surgical; cholecystectomy.
49505	Repair initial inguinal hernia, age 5 years or over; reducible.
47600	Cholecystectomy.

However, the following CPT codes were subsequently withdrawn from the 5-Year Review: 44604, 44605, 47480, 47490, 47510, 47511, 47525 and 47530. ASCRS also withdrew CPT codes 44152 and 44153, and is referring them to the CPT Editorial Panel.

For most codes, a standard RUC survey with over 30 responses was used. However, the surveys for CPT code 43622 had 29 responses and CPT code 43634 had 26 responses. Minisurveys, with over 30 responses, were used for CPT codes 44151 and 44156. Where NSQIP data was available, the specialty society also used an alternative methodology based on a building-block approach that used intra-service times and length of stay data from the NSQIP database to develop the recommendations. A specialty society consensus panel then assigned pre-service times, immediate post-service times, as well as IWPUT estimates, with the number and level of office visits determined based on comparisons to codes requiring similar physician work.

RUC Recommendations

The RUC recommended maintaining the existing RVUs for CPT codes 44140 and 49505 because the RUC believed there was a lack of compelling evidence that the work had changed.

For those services without NSQIP data, where only survey data was used as a basis for review, the RUC recommended the survey median for CPT codes 38100, 38101, 38115, 43620, 43632, 43634, 44156, 47765. For CPT code 49010, the RUC recommended use of the survey's 25th percentile because the RUC recommended deleting one hospital visit. For CPT code 47760, the RUC recommended the 25th percentile because the RUC believed that the 25th percentile was closer to the reference code. The RUC recommended use of the surveyed 75th percentile (25 work RVUs) for: CPT code 44603, which represents the suturing of multiple small intestinal perforations, to keep the correct rank order with CPT code 44602 (22.00 recommended work RVUs) that is used for the repair of a single perforation; CPT code 43622 because the RUC believed that the use of the median value would create a rank order anomaly; and CPT code 44151 because the RUC believed that the survey underestimated the physician time required for the service.

For CPT codes 47780 and 47785, the RUC used a building-block method to arrive at a recommendation which added 4.00 work RVUs to the recommended work RVUs for the respective base CPT codes 47760 and 47765 to account for the Roux-en-Y procedure. This resulted in recommended RVUs that were lower than the survey median for CPT code 47780 and higher for CPT code 47785.

For services for which NSQIP data were presented along with survey data, the RUC recommended the use of the surveys 25th percentile for CPT codes 19180, 47562, and 49002. The RUC used the NSQIP data to validate the recommendation to use the surveyed median work RVUs for CPT codes 43632, 43633, 43820, 43840, 44143, 44150, 44155 and 44602. Other RUC recommendations used the NSQIP data to increase the work RVUs above the survey median and, in one instance, beyond the survey's 75th percentile. For CPT codes 44120, 44130 and 47600, the RUC believed the physicians responding to the survey underestimated their intra-service time. Therefore, the RUC applied what was believed to be an appropriate IWPUT to the additional NSQIP time and added the resulting work RVUs to the survey median.

The RUC recommended that CPT code 49000 be referred to the CPT Editorial Panel because this code is currently used for two distinct patient populations and needs to be separated into two codes to be appropriately valued.

The 5-Year Review process allows specialty societies to request that the RUC review the work RVUs of additional codes where a rank order anomaly might have been caused by a RUC 5-Year Review recommendation for codes in the same family. Upon reviewing the workgroup recommendations for the partial colectomy procedures, CPT codes 44140 and 44143, the RUC determined that other codes in the family, CPT codes 44141, 44144, 44145, 44146 and 44147, needed to be reviewed to avoid rank order anomalies.

The RUC considered these CPT codes at their February 2006 meeting. The specialty society presented standard RUC surveys for all these services. For CPT codes 44141, 44144, 44146 and 44147, the RUC recommended the survey median. However, for CPT code 44145, the RUC recommended to maintain the current value of 26.38

work RVUs because the post-operative work is slightly less than the CPT code 44144 for which 27.00 work RVUs are recommended.

The RUC-recommended work RVUs for these CPT codes were as follows: 19180 = 14.67 work RVUs; 38100 = 18.00 work RVUs; 38101 = 18.00 work RVUs; 38115 = 20.00 work RVUs; 43620 = 31.00 work RVUs; 43621 = 36.00 work RVUs; 43622 = 36.50 work RVUs; 43632 = 32.00 work RVUs; 43633 = 30.00 work RVUs; 43634 = 33.50 work RVUs; 43820 = 20.00 work RVUs; 43840 = 20.00 work RVUs; 44120 = 20.11 work RVUs; 44130 = 20.87 work RVUs; 44140 = 20.97 work RVUs; 44141 = 27.00 work RVUs; 44143 = 25.00 work RVUs; 44144 = 27.00 work RVUs; 44145 = 26.38 work RVUs; 44146 = 33.00 work RVUs; 44147 = 31.00 work RVUs; 44150 = 27.50 work RVUs; 44151 = 32.00 work RVUs; 44155 = 31.50 work RVUs; 44156 = 34.50 work RVUs; 44602 = 22.00 work RVUs; 44603 = 25.00 work RVUs; 47562 = 11.07 work RVUs; 47600 = 15.88 work RVUs; 47760 = 34.75 work RVUs; 47765 = 48.50 work RVUs; 47780 = 38.75 work RVUs; 47785 = 52.50 work RVUs; 49002 = 15.75 work RVUs; 49010 = 15.00 work RVUs; and 49505 = 7.59 work RVUs.

CMS Proposed Valuation

We agree with the RUC-recommended work RVUs for CPT codes 19180, 38100, 38101, 38115, 43620, 43621, 43622, 43632, 43633, 43634, 43820, 43840, 44140, 44141, 44143, 44144, 44145, 44146, 44147, 44150, 44151, 44155, 44156, 44602, 44603, 47562, 47760, 47765, 47780, 47785, 49002, 49010 and 49505.

We have concerns with the RUC recommendations to use the NSQIP data to increase the work RVUs for CPT codes 44120, 44130 and 47600 above the median, and, for 47600 above the 75th percentile, from the survey. While we support the use of such a database as validation for survey results, we believe that the application of the NSQIP IWPUT to the 25-minute difference in intra-time between the survey and NSQIP is questionable. First, it is still not clear whether the NSQIP data is truly representative. Second, the IWPUT applied to the additional 25 minutes is higher than the IWPUT for the rest of the intra-time. Third, such a methodology assumes, without evidence, that there is a linear relationship between the survey respondents' estimate of time and estimate of work RVUs; however, even if the survey time estimates had matched the NSQIP data, it is not clear whether or by how much the respondents would have increased their work value estimate. Fourth, until we have available valid and representative data such as the NSQIP for all procedures, there is the risk that applying the data randomly could distort the relativity between services. Therefore, we are proposing to use the median survey values of 18.00, 20.00 and 14.00 as the work RVUs for CPT codes 44120, 44130 and 47600, respectively.

b. Colon and Rectal Surgery

The ASCRS submitted several colorectal surgery CPT codes (see Table 43).

TABLE 43

CPT code	Descriptor
45020	Incision and drainage of deep supralevator, pelvirectal, or retrorectal abscess.
45300	Proctosigmoidoscopy, rigid; diagnostic, with or without collection of specimen(s) by brushing or washing (separate procedure).
45303	Proctosigmoidoscopy, rigid; with dilation (e.g., balloon, guide wire, bougie).
45305	Proctosigmoidoscopy, rigid; with biopsy, single or multiple.
45307	Proctosigmoidoscopy, rigid; with removal of foreign body.
45308	Proctosigmoidoscopy, rigid; with removal of single tumor, polyp, or other lesion by hot biopsy forceps or bipolar cautery.
45309	Proctosigmoidoscopy, rigid; with removal of single tumor, polyp, or other lesion by snare technique.
45315	Proctosigmoidoscopy, rigid; with removal of multiple tumors, polyps, or other lesions by hot biopsy forceps, bipolar cautery or snare technique.
45317	Proctosigmoidoscopy, rigid; with control of bleeding (e.g., injection, bipolar cautery, unipolar cautery, laser, heater probe, stapler, plasma coagulator).
45320	Proctosigmoidoscopy, rigid; with ablation of tumor(s), polyp(s), or other lesion(s) not amenable to removal by hot biopsy forceps, bipolar cautery or snare technique (e.g., laser).
45321	Proctosigmoidoscopy, rigid; with decompression of volvulus.
45327	Proctosigmoidoscopy, rigid; with transendoscopic stent placement (includes predilation).
46040	Incision and drainage of ischiorectal and/or perirectal abscess (separate procedure).
46045	Incision and drainage of intramural, intramuscular, or submucosal abscess, transanal, under anesthesia.
46060	Incision and drainage of ischiorectal or intramural abscess, with fistulectomy or fistulotomy, submuscular, with or without placement of seton.
46270	Surgical treatment of anal fistula (fistulectomy/fistulotomy); subcutaneous.
46275	Surgical treatment of anal fistula (fistulectomy/fistulotomy); submuscular.
46280	Surgical treatment of anal fistula (fistulectomy/fistulotomy); complex or multiple, with or without placement of seton.
46285	Surgical treatment of anal fistula (fistulectomy/fistulotomy); second stage.
46600	Anoscopy; diagnostic, with or without collection of specimen(s) by brushing or washing (separate procedure).
46604	Anoscopy; with dilation (e.g., balloon, guide wire, bougie).
46606	Anoscopy; with biopsy, single or multiple.
46608	Anoscopy; with removal of foreign body.
46610	Anoscopy; with removal of single tumor, polyp, or other lesion by hot biopsy forceps or bipolar cautery.
46611	Anoscopy; with removal of single tumor, polyp, or other lesion by snare technique.
46612	Anoscopy; with removal of multiple tumors, polyps, or other lesions by hot biopsy forceps, bipolar cautery or snare technique.
46614	Anoscopy; with control of bleeding (e.g., injection, bipolar cautery, unipolar cautery, laser, heater probe, stapler, plasma coagulator).
46615	Anoscopy; with ablation of tumor(s), polyp(s), or other lesion(s) not amenable to removal by hot biopsy forceps, bipolar cautery or snare technique.
46760	Sphincteroplasty, anal, for incontinence, adult; muscle transplant.
46761	Sphincteroplasty, anal, for incontinence, adult; levator muscle imbrication (Park posterior anal repair).
46762	Sphincteroplasty, anal, for incontinence, adult; implantation artificial sphincter.

ASCRS subsequently withdrew CPT codes 46760, 46761 and 46762 from the 5-Year Review.

For most codes, a standard RUC survey with over 30 responses was used. A minisurvey was used for a few codes.

RUC Recommendations

The RUC agreed with the specialty society's recommendations to maintain the current work RVUs for CPT codes 46040, 46060 and 46280 because the survey data supported the existing work associated with the code.

The RUC recommended the increased work RVUs at the surveys' median work values, as requested by the specialty society, for CPT codes 45020, 46045, 46270, 46275 and 46285.

For the proctoscopy-anoscopy family of codes, the RUC agreed that the surveyed median work RVUs, and often even the 25th percentile, were inconsistent with the reference code. Therefore, the RUC did not reference the surveyed RVUs in arriving at the recommendations. Rather, the RUC used the surveyed times for each service and applied what the workgroup considered an appropriate IWPUT to these times to arrive at the recommended work RVUs for this family.

The specific RUC work RVU recommendations for these colon and rectal surgery CPT codes were as follows: 45020 = 7.75 work RVUs; 45300 = 0.91 work RVUs; 45303 = 2.22 work RVUs; 45305 = 2.01 work RVUs; 45307 = 2.22 work RVUs; 45308 = 2.01 work RVUs; 45309 = 2.22 work RVUs; 45315 = 2.22 work RVUs; 45317 = 1.08 work RVUs; 45320 = 2.43 work RVUs; 45321 = 2.76 work RVUs; 45327 = 3.63 work RVUs; 46040 = 4.95 work RVUs; 46045 = 5.50 work RVUs; 46060 = 5.68 work RVUs; 46270 = 4.50 work RVUs; 46275 = 5.00 work RVUs; 46280 = 5.97 work RVUs; 46285 = 5.00 work RVUs; 46600 = 0.49 work RVUs; 46604 = 1.08 work RVUs; 46606 = 1.76 work RVUs; 46608 = 1.95 work RVUs; 46610 = 1.95 work RVUs; 46611 = 1.08 work RVUs; 46612 = 2.14 work RVUs; 46614 = 1.08 work RVUs; and 46615 = 1.18 work RVUs.

CMS Proposed Valuation

We agree with the RUC-recommended work RVUs for CPT codes 45020, 46040, 46045, 46060, 46270, 46275, 46280, and 46285.

We are proposing not to accept the RUC recommendations for all the presented codes in the proctoscopy-anoscopy family. We are proposing to maintain the current work RVUs for CPT codes 45300, 45303, 45305, 45307, 45308, 45309, 45315, 45317, 45320, 45321, 45327, 46600, 46604, 46606, 46608, 46610, 46611, 46612, 46614 and 46615.

We believe that the method used by the RUC to obtain work values for these services was flawed. The calculation of the recommended work RVUs depended solely on applying a workgroup-derived IWPUT to the surveyed physician time from surveys that were considered otherwise unusable. We do not believe that the use of IWPUT, in the absence of other supporting data, has been previously accepted by the RUC. We believe the RUC has established rules that state that IWPUT cannot be the sole rationale for valuation and it appears that this workgroup might not have adhered to that standard. We believe that this use of IWPUT differs from that used by workgroup one, as described above. There were acceptable surveys that were used as anchors to create the correct rank order for the dermatology codes without adequate surveys. In addition, for the dermatology codes, the calculation was generally used to validate the current or lower work RVUs for the services, while for these scope codes, the calculation was not used to validate but to support significant increases for many of the services. However, if the specialty society wishes to resurvey these codes and the RUC submits work RVU recommendations to CMS, we would certainly be willing to consider them.

c. Vascular Surgery

The Society for Vascular Surgery (SVS) submitted the CPT codes in Table 44 for review. However, the specialty society subsequently withdrew CPT codes 27603, 35612 and 35642 from review.

TABLE 44

CPT code	Descriptor
27603	Incision and drainage, leg or ankle; deep abscess or hematoma.
27880	Amputation, leg, through tibia and fibula.
28805	Amputation, foot; transmetatarsal.
33877	Repair of thoracoabdominal aortic aneurysm with graft, with or without cardiopulmonary bypass.
34001	Embolectomy or thrombectomy, with or without catheter; carotid, subclavian or innominate artery, by neck incision.
34201	Embolectomy or thrombectomy, with or without catheter; femoropopliteal, aortoiliac artery, by leg incision.
34471	Thrombectomy, direct or with catheter; subclavian vein, by neck incision.
35081	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, abdominal aorta.
35102	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, abdominal aorta involving iliac vessels (common, hypogastric, external).
35216	Repair blood vessel, direct; intrathoracic, without bypass.
35381	Thromboendarterectomy, with or without patch graft; femoral and/or popliteal, and/or tibioperoneal.
35501	Bypass graft, with vein; carotid.
35506	Bypass graft, with vein; carotid-subclavian.
35507	Bypass graft, with vein; subclavian-carotid.
35508	Bypass graft, with vein; carotid-vertebral.
35509	Bypass graft, with vein; carotid-carotid.
35515	Bypass graft, with vein; subclavian-vertebral.
35516	Bypass graft, with vein; subclavian-axillary.
35541	Bypass graft, with vein; aortoiliac or bi-iliac.
35546	Bypass graft, with vein; aortofemoral or bifemoral.
35556	Bypass graft, with vein; femoral-popliteal.
35566	Bypass graft, with vein; femoral-anterior tibial, posterior tibial, peroneal artery or other distal vessels.
35583	In-situ vein bypass; femoral-popliteal.
35585	In-situ vein bypass; femoral-anterior tibial, posterior tibial,or peroneal artery.
35601	Bypass graft, with other than vein; carotid.
35606	Bypass graft, with other than vein; carotid-subclavian.

TABLE 44—Continued

CPT code	Descriptor
35612	Bypass graft, with other than vein; subclavian-subclavian.
35616	Bypass graft, with other than vein; subclavian-axillary.
35641	Bypass graft, with other than vein; aortoiliac or bi-iliac.
35642	Bypass graft, with other than vein; carotid-vertebral.
37720	Ligation and division and complete stripping of long or short saphenous veins.
60600	Excision of carotid body tumor; without excision of carotid artery.
60605	Excision of carotid body tumor; with excision of carotid artery.

For all codes, a standard RUC survey was used. All but the following CPT codes had 30 or more responses: 34471 (28 responses), 35508 (23 responses), 35515 (18 responses), 35516 (29 responses), 35616 (29 responses), 60600 (19 responses). The specialty society also used the intra-service times and length of stay data from the NSQIP database to develop some of its recommendations. A specialty society consensus panel then assigned pre-service times, and immediate post-service times, as well as IWPUT estimates.

RUC Recommendations

The RUC agreed with the specialty society that the following CPT codes cannot undergo the RUC evaluation process before having their descriptors revised and recommended referring these CPT codes to the CPT Editorial panel: 35381, 35501, 35507, 35509, 35541, 35546, 35601, 35641 and 37720. (Note that CPT code 37720 was subsequently deleted by CPT for CY 2006.) For the remaining codes, the RUC reviewed both the survey data and the NSQIP data, where provided, for each procedure. In many instances, where the NSQIP time and length of stay data were available, the RUC believed that the physicians responding to the survey underestimated their intra-service time and that the NSQIP data more accurately reflected the actual intra-service times for these procedures.

The RUC accepted the specialty society's requested increase in work RVUs for 12 CPT codes, agreeing with the specialty society that these procedures were undervalued due to compelling evidence such as changes in length of stay, changes in patient populations, and incorrect assumptions made in the previous valuation of the service. For CPT codes 27880, 28805, 34001, 34471, 35506, 35508, 35515, 35516, 35606, 60600 and 60605, the RUC-recommended work RVUs were at the survey median or lower. However, for CPT code 33877, the RUC accepted a work value greater than the survey's 75th percentile that was derived from a building-block approach using the NSQIP data for the service. The RUC increased the work RVUs for nine codes. For eight of the codes, the increases were at levels below those requested by the specialty society, and for one code the increase was slightly higher than the requested work RVUs. For CPT codes 35081, 35216, 35583 and 35616, the recommended increase was no higher than the surveyed median work RVUs. For CPT codes 34201, 35102, 35556, 35566, and 35585, the RUC accepted work values greater than the survey's median percentile that were derived from a building-block approach using the NSQIP data for the service.

The specific RUC-recommended work RVUs for these CPT codes are as follows: 27880 = 13.75 work RVUs; 28805 = 11.25 work RVUs; 33877 = 64.04 work RVUs; 34001 = 16.25 work RVUs; 34201 = 18.31 work RVUs; 34471 = 20.00 work RVUs; 35081 = 31.00 work RVUs; 35102 = 36.28 work RVUs; 35216 = 34.00 work RVUs; 35506 = 23.75 work RVUs; 35508 = 25.00 work RVUs; 35515 = 25.00 work RVUs; 35516 = 23.00 work RVUs; 35556 = 27.25 work RVUs; 35566 = 32.00 work RVUs; 35583 = 26.00 work RVUs; 35585 = 32.00 work RVUs; 35606 = 21.00 work RVUs; 35616 = 21.00 work RVUs; 60600 = 24.00 work RVUs; and 60605 = 30.50 work RVUs.

CMS Proposed Valuation

We accept the RUC-recommended work RVUs for CPT codes 27880, 28805, 34001, 34471, 35216, 35506, 35508, 35515, 35516, 35606, 60600, 60605, 35081, 35583, and 35616.

We disagree with the RUC recommendations for CPT codes 33877, 34201, 35102, 35556, 35566, and 35585. For these services, the RUC used the NSQIP time data to increase the work values above the survey median, and even for above several codes the 75th percentile. For the reasons discussed above, we reject such a use of the NSQIP data at this time. Therefore, we are proposing to use the survey median work RVUs for these CPT codes: 33877 = 53.00 work RVUs; 34201 = 17.00 work RVUs; 35102 = 34.00 work RVUs; 35556 = 25.00 work RVUs; 35566 = 30.00 work RVUs; and 35585 = 30.00 work RVUs.

8. Otolaryngology and Ophthalmology

[If you choose to comment on issues in this section, please include the caption ''DISCUSSION OF COMMENTS–OTOLARYNGOLOGY AND OPTHALMOLOGY'' at the beginning of your comments.]

a. Otolaryngology Procedures

The American Academy of Otolaryngology—Head and Neck Surgery (AAO-HNS) submitted the CPT codes in Table 45 for review.

TABLE 45

CPT code	Descriptor
31225	Maxillectomy; without orbital extenteration.
31230	Maxillectomy; with orbital exenteration (en bloc).
31360	Laryngectomy; total, without radical neck dissection.
31365	Laryngectomy; total, with radical neck dissection.
31367	Laryngectomy; subtotal supraglottic, without radical neck dissection.
31368	Laryngectomy; subtotal supraglottic, with radical neck dissection.
31370	Partial laryngectomy (hemilaryngectomy); horizontal.
31375	Partial laryngectomy (hemilaryngectomy); laterovertical.
31380	Partial laryngectomy (hemilaryngectomy); anterovertical.
31382	Partial laryngectomy (hemilaryngectomy); antero-latero-vertical.

TABLE 45—Continued

CPT code	Descriptor
31390	Pharyngolaryngectomy, with radical neck dissection; without reconstruction.
31395	Pharyngolaryngectomy, with radical neck dissection; with reconstruction.
38700	Suprahyoid lymphadenectomy.
38720	Cervical lymphadenectomy (complete).
38724	Cervical lymphadenectomy (modified radical neck dissection).
41120	Glossectomy; less than one-half tongue.
41130	Glossectomy; hemiglossectomy.
41135	Glossectomy; partial, with unilateral radical neck dissection.
41140	Glossectomy; complete or total, with or without tracheostomy, without radical neck dissection.
41145	Glossectomy; complete or total, with or without tracheostomy, with unilateral radical neck dissection.
41150	Glossectomy; composite procedure with resection floor of mouth and mandibular resection, without radical neck dissection.
41153	Glossectomy; composite procedure with resection floor of mouth, with suprahyoid neck dissection.
41155	Glossectomy; composite procedure with resection floor of mouth, mandibular resection, and radical neck dissection (Commando type).
42120	Resection of palate or extensive resection of lesion.
42842	Radical resection of tonsil, tonsillar pillars, and/or retromolar trigone; without closure.
42844	Radical resection of tonsil, tonsillar pillars, and/or retromolar trigone; closure with local flap (e.g., tongue, buccal).
42845	Radical resection of tonsil, tonsillar pillars, and/or retromolar trigone; closure with other flap.
42890	Limited pharyngectomy.
42892	Resection of lateral pharyngeal wall or pyriform sinus, direct closure by advancement of lateral and posterior pharyngeal walls.
42894	Resection of pharyngeal wall requiring closure with myocutaneous flap.

We initially requested that the RUC review five CPT codes but then withdrew CPT code 31255 from the 5-Year Review (see Table 46).

TABLE 46

CPT code	Descriptor
30520	Septoplasty or submucous resection, with or without cartilage scoring, contouring replacement with graft.
31255	Nasal/sinus endoscopy, surgical; with ethmoidectomy, total (anterior and posterior).
31575	Laryngoscopy, flexible fiberoptic; diagnostic.
31579	Laryngoscopy, flexible or rigid fiberoptic, with stroboscopy.
41100	Biopsy of tongue; anterior two-thirds.
69210	Removal impacted cerumen (separate procedure), one or both ears.

RUC Recommendations

For one CPT code 42120, palate resection procedure, the RUC, based on the data presented by the specialty society, agreed that there was increased work and intensity involved in comparison to other codes with similar intensity. The RUC believed the survey results reflected the complexity of the patient, physician time and work necessary in performing this procedure, and recommended work RVUs of 11.00 for CPT code 42120.

The specialty society presented data on two maxillectomy procedures, CPT codes 31225 and 31230, which the RUC also viewed as undervalued. The RUC believed that the re-evaluation of these two codes corrects rank order anomalies and accounts for the appropriate intensity for each procedure. The RUC recommended work RVUs of 24.00 for CPT code 31225 and 28.00 for CPT code 31230.

For three lymphadendectomy procedures, CPT codes 38700, 38720, and 38724, the specialty society presented data with the rationale that the previous valuation was flawed because the procedures were not evaluated by otolaryngologists. The RUC believed that the survey results reflected the appropriate complexity of the patient, physician time and work necessary in performing the procedure, and justified an increase in physician work. The RUC-recommended work RVUs for these CPT codes are as follows: 38700 = 12.00 work RVUs; 38720 = 20.00 work RVUs; and 38724 = 22.00 work RVUs.

The specialty society presented survey data on three pharyngectomy procedures, CPT codes 42890, 42892, and 42894, which had never been reviewed by the RUC. The RUC agreed that there was a change in the patient population and that the increased intensity involved in these procedures was comparable to other codes with similar intensity. The RUC recommended the increase demonstrated by the survey median which was 17.00 work RVUs for CPT code 42890, 23.09 work RVUs for CPT code 42892, and 30.00 work RVUs for CPT code 42894.

The specialty society presented survey data on three tonsillectomy procedures, CPT codes 42842, 42844, and 42845, which the RUC agreed were undervalued due to a previous flawed methodology. The RUC believed that the survey results reflected the appropriate physician work and time necessary in performing this procedure and recommended the following work RVUs for these CPT codes: 42842 = 11.00 work RVUs; 42844 = 16.10 work RVUs; and 42845 = 32.00 work RVUs.

For the partial glossectomy procedures, CPT codes 41120, 41130, and 41135, the RUC believed that there was not compelling evidence to increase the work for CPT code 41120, and, therefore, recommended maintaining the current value for this service. The RUC also agreed that increasing the values for the two remaining procedures would correct the existing rank order anomalies and that these increases were

justified by survey results. The recommendation for the work RVUs for these CPT codes is as follows: 41120 = 9.76 work RVUs; 41130 = 14.00 work RVUs; and 41135 = 27.00 work RVUs.

For complete glossectomy procedures, CPT codes 41140 and 41145, the specialty society presented survey data on these procedures and suggested decreasing the work RVU of CPT code 41140. The RUC believed that the survey results did not justify decreasing the work RVUs for this service, particularly because over half of the survey respondents indicated that the work of performing CPT code 41140 has not changed in the past 5 years. Therefore, the RUC recommended maintaining the value for this code. The RUC believed that the flawed methodology previously used for valuing CPT code 41145 caused this procedure to be misvalued and that an increase in work was validated by the survey median results. The RUC recommended the following work RVUs for these CPT codes: 41140 = 25.46 work RVUs; and 41145 = 34.00 work RVUs.

For the composite glossectomy procedures, CPT codes 41150, 41153, and 41155, the specialty society presented survey data on each of these procedures, noting that the current work RVUs for each of these services create a rank order anomaly. The RUC agreed that increasing the RVUs would correct these rank order anomalies and that these increases were justified by the survey results. The RUC-recommended work RVUs for these CPT codes are as follows: 41150 = 26.50 work RVUs; 41153 = 34.00 work RVUs; and 41155 = 40.00 work RVUs.

For the laryngopharyngectomy procedures, CPT codes 31360, 31365, 31390 and 31395, the specialty society presented as compelling evidence the rationale that the current work RVUs create rank order anomalies, and that there also has been a change in the patient population. The RUC agreed that increasing the RVUs of these procedures by accepting the 75th percentile of survey results corrected the specific rank order anomalies and also accounted for the change in the patient population. The RUC-recommended work RVUs for these CPT codes are as follows: 31360 = 28.00 work RVUs; 31365 = 37.00 work RVUs; 31390 = 40.00 work RVUs; and 31395 = 44.00 work RVUs.

For the laryngectomy procedures, CPT codes 31367, 31368, 31370, 31375, 31380 and 31382, the specialty society presented survey data with the rationale that the current work values are based on a flawed methodology that creates rank order anomalies, and that there also has been a change in patient population. The RUC agreed with the specialty society and recommended increasing the work RVUs for these services to maintain rank order between the codes in the family and to establish the correct intensity of the procedure based on the change in patient population. The RUC-recommended work RVUs for these CPT codes are: 31367 = 27.36 work RVUs; 31368 = 36.00 work RVUs; 31370 = 25.00 work RVUs; 31375 = 25.00 work RVUs; 31380 = 25.00 work RVUs; and 31382 = 28.00 work RVUs.

For CPT code 30520, based on the increase in physician time in the current survey data, the RUC believed that the service was misvalued and that there was additional work involved which was not previously captured. Using the building-block methodology, the RUC recommended a work RVU of 6.27 for CPT code 30520.

For CPT codes 31575 and 31579, the RUC agreed with the specialty society that the surveys validate the current values. The RUC also believed that the survey validated the current work value for CPT code 41100, particularly because 98 percent of survey respondents indicated that the work in performing this service has not changed in the past 5 years. The RUC recommended maintaining the original work values of 1.10 work RVUs for CPT code 31575, 2.26 work RVUs for CPT code 31579, and 1.63 work RVUs for CPT code 41100.

The specialty society provided survey data for CPT code 69210 using the rationale that the patient population had become more complex. The RUC did not agree with the specialty society that the patient population had changed because 94 percent of the survey respondents indicated that the work in performing this service has not changed in the past 5 years. The RUC recommended maintaining the current work value of 0.61 for this service.

CMS Proposed Valuation

We are in agreement with the RUC-recommended work RVUs for the following otolaryngology CPT codes: 38700, 38720, 38724, 41120, 41130, 41135, 41140, 41145, 42120, 42890, 42892, and 42894.

For the tonsillectomy procedures, CPT codes 42842, 42844, and 42845, the number of hospital days decreased by at least two days (including critical care visits for one code), but the outpatient post-operative visits increased by one. The median values for intra-service times were accepted by the RUC for these services, which is an indication that a value other than the 75th percentile for work also may be appropriate. CPT codes 42842 and 42844 were valued at the median work RVU obtained from the surveys. However, CPT code 42845 was valued by the RUC at the 75th percentile for work. Therefore, we are accepting the median recommended work values for CPT codes 42842 of 11.00 work RVUs and 42844 of 16.10 work RVUs and, consistent with use of the median, proposing work RVUs for CPT code 42845 of 29.00.

For the composite glossectomy procedures, CPT codes 41150, 41153, and 41155, the number of hospital days decreased by at least 2 days (including, in some instances, critical care visits). CPT codes 41153 and 41155 were valued by the RUC at the 75th percentile for work, but CPT code 41150 was valued based on the median work value. The median values for intra-service times were accepted by the RUC for these services, which is an indication that a value other than the 75th percentile for work also may be appropriate. Therefore, we are accepting the RUC-recommended work RVUs of 26.50 for CPT code 41150 which were based on the median work value, and consistent with use of the median proposing work RVUs of 30.00 for CPT code 41153 and 36.00 for CPT code 41155.

For the laryngopharyngectomy procedures, CPT codes 31360, 31365, 31367, 31368, 31370, 31375, 31380, 31382, 31390 and 31395, the number of hospital days decreased by at least two days and the post-operative outpatient visits increased by one day. However, in one instance the number of outpatient visits decreased (CPT code 31395). The median values for intra-service times were accepted by the RUC for these services, which is an indication that a value other than the 75th percentile for work also may be appropriate. Therefore, we are proposing using median values for these services resulting in the following work RVUs for these CPT codes: 31360 = 24.00 work RVUs; 31365 = 31.50 work RVUs; 31367 = 24.00 work RVUs; 31368 = 30.50 work RVUs; 31370 = 24.00 work RVUs; 31375 = 22.50 work RVUs; 31380 = 22.00 work RVUs; 31382 = 25.00 work RVUs; 31390 = 35.00 work RVUs; and 31395 = 39.50 work RVUs.

For CPT codes 30520, 31575, 31579, 41100 and 69210, we are in agreement with the RUC-recommended work RVUs for these services, except for CPT code 41100. The RUC recommended maintaining the current work RVUs of 1.63 for this service, which is even greater than the 75th percentile for work, which is what the specialty

society had recommended. We believe the more appropriate work RVUs for this service is represented by the median, which is 1.37, and, therefore, we are recommending 1.37 work RVUs for CPT code 41100.

We would note that although we accepted the RUC's recommendation of a work RVU of 0.61 for CPT code 69210, we are concerned with this valuation for the use of this code for routine removal of ear wax during a physical examination of a patient. This code is listed with a ''separate procedure'' designation in the CPT code book, meaning that it is billed most properly when it is the only service provided for a particular date of service. However, Medicare data used for evaluation of codes in the current 5-Year Review indicate that CPT code 69210 was billed with an E/M service 63 percent of the time. It is our understanding that CPT code 69210 is to be used when there is a substantial amount of cerumen in the external ear canal that is very difficult to remove and that impairs the patient's auditory function. We will continue to monitor the use of this code for the appropriate circumstances.

b. Ophthalmology Services

The American Academy of Ophthalmology (AAO), the American Optometric Association (AOA) and the American Society of Cataract and Refractive Surgery submitted 15 codes for the 5-Year Review (see Table 47). However, the specialty societies subsequently withdrew five of these codes (CPT codes 65420, 65900, 67917, 67924 and 68750) from the 5-Year Review.

TABLE 47

CPT code	Descriptor
65420	Excision or transposition of pterygium; without graft.
65426	Excision or transposition of pterygium; with graft.
65850	Trabeculotomy ab externo.
65900	Removal of epithelial downgrowth, anterior chamber of eye.
67414	Orbitotomy without bone flap (frontal or transconjunctival approach); with removal of bone for decompression.
67445	Orbitotomy with bone flap or window, lateral approach (e.g., Kroenlein); with removal of bone for decompression.
67500	Retrobulbar injection; medication (separate procedure, does not include supply of medication).
67505	Retrobulbar injection; alcohol.
67515	Injection of medication or other substance into Tenon's capsule.
67904	Repair of blepharoptosis; (tarso) levator resection or advancement, external approach.
67911	Correction of lid retraction.
67917	Repair of ectropion; extensive (e.g., tarsal strip operations).
67924	Repair of entropion; extensive (e.g., tarsal strip or capsulopalpebral fascia repairs operation).
67966	Excision and repair of eyelid, involving lid margin, tarsus, conjunctiva, canthus, or full thickness, may include preparation for skin graft or pedicle flap with adjacent tissue transfer or rearrangement; over one-fourth of lid margin.
68750	Conjunctivorhinostomy (fistulization of conjunctiva to nasal cavity); with insertion of tube or stent .

We submitted the following ophthalmology CPT codes for review (see Table 48).

TABLE 48

CPT code	Descriptor
66761	Iridotomy/iridectomy by laser surgery (e.g., for glaucoma) (one or more sessions).
66821	Discission of secondary membranous cataract (opacified posterior lens capsule and/or anterior hyaloid); laser surgery (e.g., YAG laser) (one or more stages).
66984	Extracapsular cataract removal with insertion of intraocular lens prosthesis (one stage procedure), manual or mechanical technique (e.g., irrigation and aspiration or phacoemulsification).
67038	Vitrectomy, mechanical, pars plana approach; with epiretinal membrane stripping.
67221	Destruction of localized lesion of choroid (e.g., choroidal neovascularization); photodynamic therapy (includes intravenous infusion).
67228	Destruction of extensive or progressive retinopathy (e.g., diabetic retinopathy), one or more sessions; photocoagulation (laser or xenon arc).
67820	Correction of trichiasis; epilation, by forceps only.
67840	Excision of lesion of eyelid (except chalazion) without closure or with simple direct closure.
68840	Probing of lacrimal canaliculi, with or without irrigation.
76519	Ophthalmic biometry by ultrasound echography, A-scan; with intraocular lens power calculation.
92083	Visual field examination, unilateral or bilateral, with interpretation and report; extended examination (e.g., Goldmann visual fields with at least 3 isopters plotted and static determination within the central 30°, or quantitative, automated threshold perimetry, Octopus program G–1, 32 or 42, Humphrey visual field analyzer full threshold programs 30–2, 24–2 or 30/60–2.
92226	Ophthalmoscopy, extended, with retinal drawing (e.g., for retinal detachment, melanoma), with interpretation and report; subsequent.
92235	Fluorescein angiography (includes multiframe imaging) with interpretation and report.
92250	Fundus photography with interpretation and report.

RUC Recommendations

The RUC questioned the survey results for CPT codes 67038 and 67228 and indicated that the survey data may be flawed because respondents may have based their answers on a different number of membranes stripped or sessions conducted. The RUC recommended that these two CPT codes be referred to the CPT Editorial Panel for clarification.

Based on a review of the survey data, the RUC agreed with the specialty society that the survey results demonstrated that the work had not changed and, thus, that the current work RVUs should be retained for the following CPT codes: 66761 = 4.06 work RVUs; 67840 = 2.04 work RVUs; 68840 = 1.25 work RVUs; 76519 = 0.54 work RVUs; 92226 = 0.33 work RVUs; 92235 = 0.81 work RVUs; and 92250 = 0.44 work RVUs. In addition, the RUC recommended retaining the work RVU of 0.50 for CPT code 92083 because the specialty society had not presented compelling evidence that the physician work had changed.

For CPT codes 67221, 67820, and 66984, the RUC recommended reductions in the work RVUs. The RUC used a building-block approach based on the work RVU of 3.24 for the reference CPT code 67141, *Prophylaxis of retinal detachment (e.g., retinal break, lattice degeneration) without drainage, one or more sessions; cryotherapy, diathermy*, and the work RVUs of 0.21 for the infusion code G0347, which contain comparable work. The RUC recommended work RVUs of 3.45 for CPT code 67221.

The RUC supported the specialty society's recommendation to decrease the work value for CPT code 67820 based on evidence that the previous Harvard survey data was flawed. The RUC agreed with assigning work RVUs of 0.71 to CPT code 67820 based on a comparison/crosswalk to the key reference service, CPT code 65205, *Removal of foreign body, external eye; conjunctival superficial*, which has work RVUs of 0.71.

For CPT code 66984, the RUC did not agree with the specialty society recommendation that the current work RVU of 10.21 should be maintained, because changes in technology and technique in the last 10 years have led to increased efficiencies. The RUC concluded that these efficiencies resulted in a lower overall time for the procedure. The RUC used the previous survey pre-service time of 44 minutes and subtracted the current survey pre-service time of 25 minutes for a difference of 19 minutes. These 19 minutes were then multiplied by an IWPUT of 0.0224, resulting in an RVU of 0.43, which was subtracted from the current value. The RUC agreed that although the intra-service physician time has decreased from the historical 50 minutes to the current survey time of 30 minutes as indicated by the survey respondents, the decrease in time reflects a decrease of only low intensity work (that is, suturing) and no further decrease in work RVUs was recommended. Therefore, the RUC recommended work RVUs of 9.78 for CPT code 66984.

The RUC agreed with the specialty society that there was compelling evidence to support the increases for CPT codes 67414, 67445, 67500, 67515, 67904, 67911, and 67966, either because the current work RVUs caused rank order anomalies, the previous Harvard survey data was misvalued when compared to codes with similar values, or there was a change in the technique of performing the procedures (specifically for CPT codes 67911 and 67966, in which skin-grafting is bundled into these codes). However, for two CPT codes, 65426 and 65850, while the RUC recognized that there was compelling evidence to support increases, the RUC did not agree with the specific increases recommended by the specialty society.

For CPT code 65426, the RUC believed that evidence suggested a change in technique for this procedure, and believed that a value close to the survey's 25th percentile was justified by using a building-block approach. For CPT code 65850, the RUC agreed that there is a rank order anomaly between CPT codes 65850 and 66170, *Fistualization of sclera for glaucoma; trabeculectomy ab externo in absence of previous surgery*, as well as a change in the patient population. The RUC believed an increase in value was justified by using a building-block approach. The RUC recommended 5.85 work RVUs for CPT code 65426 and 11.14 work RVUs for CPT code 65850.

For CPT code 66821, the RUC agreed that the intensity of this procedure was misvalued and that an increase in the relative value would be appropriate. The RUC disagreed with our previous intensity crosswalk to CPT code 66984, *Extracapsular cataract removal with insertion of intraocular lens prosthesis (one stage procedure), manual or mechanical technique (e.g., irrigation and aspiration or phacoemulsification)*, specified in the Five-Year Review of Work Relative Value Units Under the Physician Fee Schedule proposed notice (May 3, 1996; 61 FR 20027). The RUC believed that the previous survey from 1995 should stand on its own as an acceptable survey due to the inappropriate selection by HCFA in 1995 of intensity for this code. The RUC-recommended work RVU for this service is 2.78, the same value recommended by the RUC in 1995.

CMS Proposed Valuation

We are in agreement with the RUC recommended work values for these ophthalmology services.

c. Additional Codes

The American Speech-Language-Hearing Association (ASHA) submitted the following speech and audiology CPT codes (see Table 49) but subsequently withdrew them from the 5-Year Review.

TABLE 49

CPT code	Descriptor
92506	Evaluation of speech, language, voice, communication, and/or auditory processing.
92507	Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual.
92508	Treatment of speech, language, voice, communication, and/or auditory processing disorder; group, two or more individuals.
92510	Aural rehabilitation following cochlear implant (includes evaluation of aural rehabilitation status and hearing, therapeutic services) with or without speech processor programming
92516	Facial nerve function studies (e.g., electroneuronography).
92520	Laryngeal function studies (ie, aerodynamic testing and acoustic testing).
92526	Treatment of swallowing dysfunction and/or oral function for feeding.
92541	Spontaneous nystagmus test, including gaze and fixation nystagmus, with recording.
92542	Positional nystagmus test, minimum of 4 positions, with recording.
92543	Caloric vestibular test, each irrigation (binaural, bithermal stimulation constitutes four tests), with recording.
92544	Optokinetic nystagmus test, bidirectional, foveal or peripheral stimulation, with recording.

TABLE 49—Continued

CPT code	Descriptor
92545	Oscillating tracking test, with recording.
92546	Sinusoidal vertical axis rotational testing.
92547	Use of vertical electrodes (List separately in addition to code for primary procedure).
92548	Computerized dynamic posturography.
92551	Screening test, pure tone, air only.
92552	Pure tone audiometry (threshold); air only.
92553	Pure tone audiometry (threshold); air and bone.
92555	Speech audiometry threshold.
92556	Speech audiometry threshold; with speech recognition.
92557	Comprehensive audiometry threshold evaluation and speech recognition (92553 and 92556 combined).
92559	Audiometric testing of groups.
92560	Bekesy audiometry; screening.
92561	Bekesy audiometry; diagnostic.
92562	Loudness balance test, alternate binaural or monaural.
92563	Tone decay test.
92564	Short increment sensitivity index (SISI).
92565	Stenger test, pure tone.
92567	Tympanometry (impedance testing).
92568	Acoustic reflex testing; threshold.
92569	Acoustic reflex testing; decay.
92571	Filtered speech test.
92572	Staggered spondaic word test.
92573	Lombard test.
92575	Sensorineural acuity level test.
92576	Synthetic sentence identification test.
92579	Visual reinforcement audiometry (VRA)
92582	Conditioning play audiometry.
92583	Select picture audiometry.
92584	Electrocochleography.
92585	Auditory evoked potentials for evoked response audiometry and/or testing of the central nervous system; comprehensive.
92586	Auditory evoked potentials for evoked response audiometry and/or testing of the central nervous system; limited.
92587	Evoked otoacoustic emissions; limited (single stimulus level, either transient or distortion products).
92588	Evoked otoacoustic emissions; comprehensive or diagnostic evaluation (comparison of transient and/or distortion product otoacoustic emissions at multiple levels and frequencies).
92596	Ear protector attenuation measurements.
92597	Evaluation for use and/or fitting of voice prosthetic device to supplement oral speech.
92601	Diagnostic analysis of cochlear implant, patient under 7 years of age; with programming.
92602	Diagnostic analysis of cochlear implant, patient under 7 years of age; subsequent reprogramming.
92603	Diagnostic analysis of cochlear implant, age 7 years or older; with programming.
92604	Diagnostic analysis of cochlear implant, age 7 years or older; subsequent reprogramming.
92605	Evaluation for prescription of non-speech-generating augmentative and alternative communication device.
92606	Therapeutic service(s) for the use of non-speech-generating device, including programming and modification.
92607	Evaluation for prescription for speech-generating augmentative and alternative communication device, face-to-face with the patient; first hour.
92608	Evaluation for prescription for speech-generating augmentative and alternative communication device, face-to-face with the patient; each additional 30 minutes (List separately in addition to code for primary procedure).
92609	Therapeutic services for the use of speech-generating device, including programming and modification
92610	Evaluation of oral and pharyngeal swallowing function.
92611	Motion fluoroscopic evaluation of swallowing function by cine or video recording.
92612	Flexible fiberoptic endoscopic evaluation of swallowing by cine or video recording.
92614	Flexible fiberoptic endoscopic evaluation, laryngeal sensory testing by cine or video recording.
92616	Flexible fiberoptic endoscopic evaluation of swallowing and laryngeal sensory testing by cine or video recording.
92620	Evaluation of central auditory function, with report; initial 60 minutes.
92621	Evaluation of central auditory function, with report; each additional 15 minutes.
92625	Assessment of tinnitus (includes pitch, loudness matching, and masking).

9. HCPAC Codes

a. Podiatric Services

[If you choose to comment on issues in this section, please include the caption ''DISCUSSION OF COMMENTS—HCPAC CODES'' at the beginning of your comments.]

We submitted the podiatric services in Table 50 for review.

TABLE 50

CPT code	Descriptor
10060	Incision and drainage of abscess (e.g., carbuncle, suppurative hidradenitis, cutaneous or subcutaneous abscess, cyst, furuncle, or paronychia); simple or single.
11040	Debridement; skin, partial thickness.

TABLE 50—Continued

CPT code	Descriptor
11041	Debridement; skin, full thickness.
11042	Debridement; skin, and subcutaneous tissue.
11730	Avulsion of nail plate, partial or complete, simple; single.
29580	Strapping; Unna boot.

HCPAC Recommendation

The HCPAC agreed with the specialty society that there was compelling evidence that the valuation of these services was incorrect due to a flawed methodology used in the previous Harvard valuation for all six podiatric codes. Based on the survey data, the specialty society requested that the work RVU increase for four codes and decrease for two codes.

For CPT codes 10060 and 29580, the HCPAC supported an increase in the existing work values for these codes and recommended a work RVU of 1.50 for CPT code 10060 and 0.60 for CPT code 29580, which represent the survey median of the survey data for these services.

For CPT code 11040, the HCPAC did not support the work RVU increase recommended by the specialty society, but instead recommended a work RVU of 0.55, which represented the 25th percentile work RVU from the survey data.

For CPT codes 11041 and 11730, the HCPAC recommended a decrease in the work RVUs and, based on the median from the survey data, recommended a work RVU of 0.80 for CPT code 11041 and 1.10 for CPT code 11730.

For CPT code 11042, the HCPAC did not agree with the specialty society that the work RVU should be increased to 1.20 work RVUs. The HCPAC recommended maintaining the current work RVU of 1.12 for this CPT code, which was slightly higher than the survey's 25th percentile work value of 1.10 work RVUs.

The HCPAC-recommended work values for these services are as follows: 10060 = 1.50 work RVUs; 11040 = 0.55 work RVUs; 11041 = 0.80 work RVUs; 11042 = 1.12 work RVUs; 11730 = 1.10 work RVUs; and 29580 = 0.60 work RVUs.

CMS Proposed Valuation

For CPT code 10060, we compared the survey times them with the current Harvard-based times used to value this service. These times are comparable and, therefore, we are recommending maintaining the current work RVUs of 1.17 for this code.

For CPT code 29580, we compared the current Harvard-based times with the survey times. Due to the small reduction in time, the recommended increase in work RVUs is not supported. Therefore, we are proposing to assign 0.55 work RVUs to this service, which represents the 25th percentile of the survey and more accurately represents the time associated with this service.

For CPT code 11730, the current work RVUs are slightly more (0.03) than the recommended value and the survey time is approximately 30 percent greater than the current Harvard-based time. For these reasons, we agree with the HCPAC's recommendation of 1.10 work RVUs for 11730 which represents the median survey value.

For CPT codes 11040, 11041 and 11042, the survey times all reflect significant reductions from current Harvard-based times used to value these services. Based on this comparison which shows decreases in time ranging from 47 percent to 68 percent, we believe that the low values from the surveys more accurately represent the valuation of these services. Therefore, we are proposing to assign work RVUs as follows: 11040 = 0.48 work RVUs; 11041 = 0.60 work RVUs; and 11042 = 0.80 work RVUs. In addition, to ensure that the other codes in this family are properly valued, we recommend the RUC should review the valuation of CPT codes 11043 and 11044.

b. Other HCPAC Codes

The American Dietetic Association submitted five CPT and HCPCS codes related to medical nutrition services that were referred to the CPT Editorial Panel (see Table 51).

TABLE 51

CPT code	Descriptor
97802	Medical nutrition therapy; initial assessment and intervention, individual, face-to-face with the patient, each 15 minutes.
97803	Medical nutrition therapy; re-assessment and intervention, individual, face-to-face with the patient, each 15 minutes.
97804	Medical nutrition therapy; group (2 or more individual(s)), each 30 minutes G0270 Medical nutrition therapy; reassessment and subsequent intervention(s) following second referral in same year for change in diagnosis, medical condition, or treatment regimen (including additional hours needed for renal disease), individual, face to face with the patient, each 15 minutes.
G0270	Medical nutrition therapy; reassessment and subsequent intervention(s) following second referral in same year for change in diagnosis, medical condition, or treatment regimen (including additional hours needed for renal disease), individual, face to face with the patient, each 15 minutes.
G0271	Medical nutrition therapy; reassessment and subsequent intervention(s) following second referral in same year for change in diagnosis, medical condition, or treatment regimen (including additional hours needed for renal disease), group (2 or more individuals), each 30 minutes.

Additionally, the ASHA submitted CPT code 96105, *Assessment of aphasia (includes assessment of expressive and receptive speech and language function, language comprehension, speech production ability, reading, spelling, writing, e.g., by Boston Diagnostic Aphasia Examination) with interpretation and report, per hour,* for review but subsequently withdrew this code.

C. Other Issues Under the 5-Year Review

[If you choose to comment on issues in this section, please include the caption ''OTHER ISSUES'' at the beginning of your comments.]

1. Anesthesia Services

Although anesthesia services are paid under the PFS, they are paid on the basis of an anesthesia code-specific base unit and time units that vary based on the anesthesia time of the case. Since anesthesia services do not have a work value per code as do other medical and surgical services, a work value must be imputed for each anesthesia code. For the last 5-Year Review, this imputed work value was compared to an actual work value determined by the RUC and the ASA through a building-block approach. Under the building-block approach, each anesthesia code was uniformly divided into five components: pre-anesthesia, equipment and supply preparation, induction period, post-induction anesthesia period, and post-anesthesia. The work was determined for each of the five components and summed to calculate total anesthesia work for the anesthesia code.

Although the ASA submitted one anesthesia code and several other codes for this 5-Year Review, they continue to believe the work of anesthesia services remain seriously undervalued. The last 5-Year Review of anesthesia services proved to be a very laborious and exhaustive process involving several different RUC workgroups. The valuation of anesthesia work is a very complex process as it involves relating components of anesthesia services to other medical and surgical services of similar time and work. The ASA was dissatisfied with the recommendations made by the RUC for the last 5-Year Review for anesthesia work. The major points of disagreement were the use and extent of extrapolation and the work value for the post-induction anesthesia period, which is the longest period of the anesthesia service.

For the last 5-Year Review, the ASA requested the RUC to extrapolate from 19 high volume anesthesia services, which were studied and accounted for over 50 percent of Medicare payments for anesthesia services, to all anesthesia services. The RUC thought that extrapolation should be limited. That is, an analysis of a single anesthesia code based on a single surgical code was insufficient when the anesthesia code covers a large number of surgical codes. For the last 5-Year Review, the building-block approach used a value of 0.025 for the IWPUT for the post-induction anesthesia period. This was a value that the RUC agreed to, which we approved, although the ASA thought it was too low.

As a result of its relationship with the RUC and the past recommendations, the ASA requested that we address the valuation of anesthesia services reported under CPT codes 00100 through 01999. The ASA furnished an analysis that builds on the methodology used in the last 5-Year Review for the valuation of work for anesthesia services.

Based on comparable physicians' services, the ASA believes that the more appropriate IWPUT for the post-induction period is 0.043. Using this IWPUT, the ASA calculated a scaling factor and used this to recalculate the post-induction work value and an adjusted total work RVU for each of the 19 codes. Based on an extrapolation from the 19 surveyed services used in the last 5-Year Review, the ASA proposed that the anesthesia work value should be increased by 37.5 percent. The extrapolation proposed by the ASA is more far reaching than the extrapolation used by the RUC in the last 5-Year Review. We do not favor using extrapolation other than on the limited basis it was used in the last 5-Year Review.

Since the ASA believes that the RUC process does not work well for their codes, they requested that we directly evaluate their recommendations independent of any RUC review of input. Although there may be some merit to the ASA approach, we believe this analysis is more appropriately done by a multispecialty workgroup within the RUC itself. Thus, we are recommending the valuation of anesthesia services, namely the proposed valuation of the post-induction time period, be referred to the RUC for their review and consideration. For example, the ASA and the RUC could review the IWPUT for post-induction time, as currently proposed by the ASA and compare this to the corresponding IWPUT recognized in the last 5-Year Review of anesthesia work for the 19 surveyed codes.

A second issue concerning anesthesia services pertains to the impact of the revised work values for E/M services and their relationship to the valuation of pre- and post-anesthesia services, components of the building-block approach. The pre- and post-anesthesia services derive their work values from the lower level E/M codes for new patients, the subsequent hospital care codes and the initial inpatient consultation codes. We are proposing to substitute the proposed revised work values for E/M codes where applicable and recompute the anesthesia work values and their impact on the increase in total anesthesia work. While this results in a very minor adjustment to anesthesia work (that is, less than 1 percent), we believe this approach provides for the consistent application of the proposed work RVUs changes.

2. Discussion of Post-Operative Visits Included in the Global Surgical Packages

We have established a national definition for a global surgical package so that payment is made consistently for the same set of services across all contractor jurisdictions. In constructing the RVUs for a global surgery service, all services that are believed to be typically included in the defined global period are built into the final resource-based RVUs and are not separately billable within the defined global period; this is reflected in the proposed work RVUs in Addenda B and C. This would include pre-surgery work, the intra-service time of actually performing the surgical procedure, and the post-operative (follow-up) visits associated with the monitoring and recovery of the patient.

As stated above in this section, we are proposing to apply the RUC-recommended new values for the E/M services to all surgical services with a 10 or 90-day global period. However, because of variations in the patient population and in practice patterns, there is some question whether the assumptions about the number and level of visits within the global period reflect the actual post-operative work performed. Some surgeons have commented to us that they perform more visits than are included in the global period for their services. It is also likely that some patients require fewer than the ''typical'' number of follow-up visits included in the global period.

Although we are not proposing any changes to our global policy at this time, we would be interested in receiving comments concerning our current policy of including these post-operative visits in the global surgical packages and what advantages or disadvantages might be associated with proposing a change to this policy in the future.

3. Codes Referred to CPT Editorial Panel From Five-Year Review of Work Relative Value Units

CPT/HCPCS Code	Mod	Descriptor
15732		Muscle-skin graft, head/neck
15831		Excise excessive skin tissue
17304		1 stage mohs, up to 5 spec
17305		2 stage mohs, up to 5 spec
20692		Apply bone fixation device
21556		Remove lesion neck/chest
23076		Removal of shoulder lesion
23200		Removal of collar bone
23210		Removal of shoulder blade
23220		Partial removal of humerus
23515		Treat clavicle fracture
23585		Treat scapula fracture
23615		Treat humerus fracture
23616		Treat humerus fracture
23630		Treat humerus fracture
23670		Treat dislocation/fracture
23680		Treat dislocation/fracture
24076		Remove arm/elbow lesion
24077		Remove tumor of arm, elbow
24150		Extensive humerus surgery
24152		Extensive radius surgery^
24545		Treat humerus fracture
24546		Treat humerus fracture
24575		Treat humerus fracture
24579		Treat humerus fracture
24635		Treat elbow fracture
24665		Treat radius fracture
24685		Treat ulnar fracture
25076		Removal forearm lesion deep
25077		Remove tumor, forearm/wrist
25170		Extensive forearm surgery
25515		Treat fracture of radius
25526		Treat fracture of radius
25545		Treat fracture of ulna
25574		Treat fracture radius & ulna
25575		Treat fracture radius/ulna
25620		Treat fracture radius ulna
25628		Treat wrist bone fracture
26615		Treat metacarpal fracture
26665		Treat thumb fracture
26685		Treat hand dislocation
26715		Treat knuckle dislocation
26735		Treat finger fracture, each
26746		Treat finger fracture, each
26765		Treat finger fracture, each
26785		Treat finger dislocation
27048		Remove hip/pelvis lesion

CPT/HCPCS Code	Mod	Descriptor
27049		Remove tumor, hip/pelvis
27076		Extensive hip surgery
27078		Extensive hip surgery
27248		Treat thigh fracture
27328		Removal of thigh lesion
27329		Remove tumor, thigh/knee
27365		Extensive leg surgery
27472		Repair/graft of thgh
27511		Treatment of thigh fracture
27513		Treatment of thigh fracture
27514		Treatment of thigh fracture
27519		Treat thigh fx growth plate
27535		Treat knee fracture
27540		Treat knee fracture
27556		Treat knee dislocation
27615		Removel tumor, lower leg
27619		Remove lower leg lesion
27645		Extensive lower leg surgery
27646		Extensive lower leg surgery
27647		Extensive ankle/heel surgery
27720		Repair of tibia
27766		Treatment of ankle fracture
27784		Treatment of fibula fracture
27792		Treatment of ankle fracture
27814		Treatment of ankle fracture
27822		Treatment of ankle fracture
27826		Treat lower leg fracture
27827		Treat lower leg fracture
27828		Treat lower leg fracture
27829		Treat lower leg joint
27832		Treat lower leg dislocation
28045		Excision of foot lesion
28415		Treat heel fracture
28445		Treat ankle fracture
28465		Treat mid foot fracture, each
28485		Treat metatarsal fracture
28505		Treat big toe fracture
28525		Treat toe fracture

CPT/HCPCS Code	Mod	Descriptor
28555		Repair foot dislocation
28585		Repair foot dislocation
28615		Repair foot dislocation
28645		Repair toe dislocation
28675		Repair toe dislocation
35381		Rechanneling of artery
35501		Artery bypass graft
35507		Artery bypass graft
35509		Artery bypass graft
35541		Artery bypass graft
35546		Artery bypass graft
35601		Artery bypass graft
35641		Artery bypass graft
37720		Removal of leg vein
44152		Removal of colon/leostomy
44153		Removal of colon/leostomy
49000		Exploration of abdomen
54150		Circumcision
54152		Circumcision
67038		Strip retinal membrane
67228		Treatment of retinal lesion
75552		Heart mri for morph w/o dye
75553		Heart mri for morph w dye
75554		Cardiac MRI/function
75555		Cardiac MRI/limited study
90465		Immune admin 1 inj, < 8 yrs
90466		Immune admin addl inj, < 8 y
90467		Immune admin o or n, < 8 yrs
90468		Immune admin o/n, addl , < 8 y
93325		Doppler color flow add-on
94657		Continued ventilator mgmt
95004		Percut allergy skin lests
95024		Id allergy test, drug/bug
95027		ld allergy litrate-airborne
97802		Medical nutrition, indiv. in
97803		Med nutrition, indiv, subseq
97804		Medical nutrition, group
99301		Nursing facility Care

CPT/HCPCS Code	Mod	Descriptor
99302		Nursing facility Care
99303		Nursing facility Care
99311		Nursing fac care, subseq
99312		Nursing fac care, subseq
99313		Nursing fac care, subseq
99321		Rest home visit, new patient
99322		Rest home visit, new patient
99323		Rest home visit, new patient
99331		Rest home visit, est patient
99332		Rest home visit, est patient
99333		Rest home visit, est patient
G0270		MNT subs tx for change dx
G0271		Group MNT 2 or more 30 mins

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4. Budget Neutrality

Section 1848(c)(2)(B)(ii) of the Act requires that increases or decreases in RVUs for a year may not cause the amount of expenditures for the year to differ by more than $20 million from what expenditures would have been in the absence of these changes. If this threshold is exceeded, we must make adjustments to preserve budget neutrality. This year, we expect that budget-neutrality adjustments will be required as a result of changes in RVUs resulting from the 5-Year Review. Revisions in payment policies, including the establishment of interim and final RVUs for coding changes that will be announced later this year, may result in additional budget-neutrality adjustments.

We considered making the statutorily required budget-neutrality adjustments (under section 1848(c)(2)(B)(ii) of the Act) to account for the 5-Year Review of physician work by reducing all work RVUs. We currently estimate that all work RVUs would have to be reduced by 10 percent under this option. Alternatively, we considered making an adjustment to the PFS CF to meet the provisions of section 1848(c)(2)(B)(ii). This option would require an estimated 5 percent reduction in the CF. We note that the application of the budget neutrality adjustment to the CF would negatively impact all PFS services; whereas the application of the budget neutrality adjustment to the work RVUs would impact only those services that have physician work RVUs. Because the need for a budget neutrality adjustment would be largely due to changes proposed as a result of the 5-Year Review of work RVUs, we believe it is more equitable to apply the adjustment across services that have work RVUs. For this third 5-Year Review, we are proposing to establish a budget neutrality adjustor that would reduce all work RVUs by an estimated 10 percent to meet the budget neutrality provisions of section 1848(c)(2)(B)(ii).

As we noted in the CY 2005 Physician Fee Schedule final rule with comment period (69 FR 66371), PE and malpractice expense RVUs were not subject to comment and will not be recalculated (other than changes to PE RVUs that result from changes in PE inputs due to changes in physician time or in the number of post procedure visits as part of the 5-Year Review of work RVUs).

5. Effect on Practice Expense Inputs Stemming From the 5-Year Review

The proposed changes for work RVUs reflect, in part, the physician's time needed to perform each service, as well as the number and level of assumed post-operative visits. To the extent that the RUC recommended changes in the times associated with the intra-service portion of the procedure, we are also proposing to adjust the clinical labor time assigned for assisting the physician in the nonfacility setting. In addition, if an accepted new work RVU reflects a change in the number or level of post-operative visits, we are proposing to modify the clinical staff time to reflect the change. This adjusted time is also applied to the equipment used in the post-operative visits. Where the number of post-operative visits has changed, the number of minimum multi-specialty visit (MMSV) packs will also be adjusted accordingly. A MMSV pack consists of the following supplies: exam table paper, 2 pairs of non-sterile gloves, a patient gown, a pillow case, and a thermometer probe cover. These changes in clinical labor and equipment time and in the quantity of supplies will have a minimal impact on the PE component.

6. Nature and Format of Comments on Work RVUs

We will accept comments on the proposed work RVUs for the codes identified in the Addendum C of this notice. We will also accept comments on the anesthesia code, CPT code 00797. Comments should discuss how the work associated with a given CPT or HCPCS code is analogous to the work in other services, or discuss the rationale for agreeing or disagreeing with the proposed work RVU. We are especially interested in information or discussions that were not presented in earlier comments.

D. Resource-Based Practice Expense (PE) RVUs

[If you choose to comment on issues in this section, please include the caption ''PRACTICE EXPENSE'' at the beginning of your comments.]

Based on section 1848(c)(1)(B) of the Act, practice expense (PE) is the portion of the resources used in furnishing the service that reflects the general categories of physician and practitioner expenses, such as office rent and wages of personnel, but excluding malpractice expenses.

Section 121 of the Social Security Amendments of 1994 (Pub. L. 103–432), enacted on October 31, 1994, required CMS to develop a methodology for a resource-based system for determining PE RVUs for each physician's service. Until that time, physicians' PEs were based on historical allowed charges. This legislation stated that the revised PE methodology must consider the staff, equipment, and supplies used in the provision of various medical and surgical services in various settings beginning in 1998. The Secretary has interpreted this to mean that Medicare payments for each service would be based on the relative PE resources typically involved with performing the service.

The initial implementation of resource-based PE RVUs was delayed from January 1, 1998, until January 1, 1999, by section 4505(a) of the Balanced Budget Act of 1997 (BBA 97) (Pub. L. 105–33). In addition, section 4505(b) of the BBA 97 required that the new payment methodology be phased-in over 4 years, effective for services furnished in CY 1999, and fully effective in CY 2002. The first step toward implementation of the statute was to adjust the PE values for certain services for CY 1998. Section 4505(d) of BBA 97 required that, in developing the resource-based PE RVUs, the Secretary must:

- Use, to the maximum extent possible, generally accepted cost accounting principles that recognize all staff, equipment, supplies, and expenses, not solely those that can be linked to specific procedures.
- Develop a refinement method to be used during the transition.
- Consider, in the course of notice and comment rulemaking, impact projections that compare new proposed payment amounts to data on actual physician PEs.

Beginning in CY 1999, we began the four year transition to resource-based PE RVUs. In CY 2002, the resource-based PE RVUs were fully transitioned.

1. Current Methodology

The following sections discuss the current PE methodology.

a. Data Sources

There are two primary data sources used to calculate PE. The AMA's Socioeconomic Monitoring System (SMS) survey data are used to develop the PE per hour (PE/HR) for each specialty. The second source of data used to calculate PE was originally developed by the Clinical Practice Expert Panels (CPEP). The CPEP data include the supplies, equipment and staff times specific to each procedure.

The AMA developed the SMS survey in 1981 and discontinued it in 1999. Beginning in 2002, we incorporated the 1999 SMS survey data into our calculation of the PE RVUs, using a 5-year average of SMS survey data. (See Revisions to Payment Policies and Five-Year Review of and Adjustments to the Relative Value Units Under the Physician Fee Schedule for CY 2002 final rule, published November 1, 2001 (66 FR 55246).) The SMS PE survey data are adjusted to a common year, 1995. The SMS data provide the following six categories of PE costs:

- Clinical payroll expenses, which are payroll expenses (including fringe benefits) for nonphysician personnel.
- Administrative payroll expenses, which are payroll expenses (including fringe benefits) for nonphysician personnel involved in administrative, secretarial or clerical activities.
- Office expenses, which include expenses for rent, mortgage interest, depreciation on medical buildings, utilities and telephones.
- Medical material and supply expenses, which include expenses for drugs, x-ray films, and disposable medical products.
- Medical equipment expenses, which include expenses depreciation, leases, and rent of medical equipment used in the diagnosis or treatment of patients.
- All other expenses, which include expenses for legal services, accounting, office management, professional association memberships, and any professional expenses not mentioned above.

In accordance with section 212 of the Medicare, Medicaid and State Child Health Insurance Program Balanced Budget Refinement Act of 1999 (BBRA) (Pub. L. 106–113), we established a process to supplement the SMS data for a specialty with data collected by entities and organizations other than the AMA (that is, the specialty itself). (See the Criteria for Submitting Supplemental Practice Expense Survey Data interim final rule with comment period, published on May 3, 2000 (65 FR 25664).) Originally, the deadline to submit supplementary survey data was through August 1, 2001. In the Revisions to Payment Policies and Five-Year Review of and Adjustments to the Relative Value Units Under the Physician Fee Schedule for CY 2002 final rule (November 1, 2001; 66 FR 55246), the deadline was extended through August 1, 2003. To ensure maximum opportunity for specialties to submit supplementary survey data, we extended the deadline to submit surveys until March 1, 2005 in the Revisions to Payment Policies Under the Physician Fee Schedule for CY 2004 final rule, (November 7, 2003; 68 FR 63196) (hereinafter referred to as CY 2004 PFS final rule).

The CPEPs consisted of panels of physicians, practice administrators, and nonphysicians (registered nurses (RNs), for example) who were nominated by physician specialty societies and other groups. There were 15 CPEPs consisting of 180 members from more than 61 specialties and subspecialties. Approximately 50 percent of the panelists were physicians.

The CPEPs identified specific inputs involved in each physician service provided in an office or facility setting. The inputs identified were the quantity and type of nonphysician labor, medical supplies, and medical equipment.

In 1999, the AMA's RUC established the Practice Expense Advisory Committee (PEAC). Since 1999, and until March 2004, the PEAC, a multi-specialty committee, reviewed the original CPEP inputs and provided us with recommendations for refining these direct PE inputs for existing CPT codes. Through its last meeting in March 2004, the PEAC provided recommendations, which we have reviewed and accepted, for over 7,600 codes. As a result, the current CPEP inputs differ markedly from those originally recommended by the CPEPs. The PEAC has now been replaced by the Practice Expense Review Committee (PERC), which acts to assist the RUC in recommending PE inputs.

b. Allocation of PEs to Services

To establish PE RVUs for specific services, it is necessary to establish the direct and indirect PE associated with each service. Our current approach allocates aggregate specialty practice costs to specific procedures and, thus, is often referred to as a ''top-down'' approach. The specialty PEs are derived from the AMA's SMS survey and supplementary survey data. The PEs for a given specialty are allocated to the services performed by that specialty on the basis of the CPEP data and work RVUs assigned to each CPT code. The specific process is detailed as follows:

Step 1—Calculation of the SMS Cost Pool for Each Specialty

The six SMS cost categories can be described as either direct or indirect expenses. The three direct expense categories include clinical labor, medical supplies and medical equipment. Indirect expenses include administrative labor, office expense, and

all other expenses. We combine these indirect expenses into a single category. The SMS cost pool for each specialty is calculated as follows:

• The specialty PE/HR for each of the three direct and one indirect cost categories from the SMS is calculated by dividing the aggregate PE per specialty by the specialty's total hours spent in patient care activities (also determined by the SMS survey). The PE/HR is divided by 60 to obtain the PE per minute (PE/MIN).

• Each specialty's PE pools (for each of the three direct and one indirect cost categories) are created by multiplying the PE/MIN for the specialty by the total time the specialty spent treating Medicare patients for all procedures (determined using Medicare utilization data). Physician time on a procedure-specific level is available through RUC surveys of new or revised codes and through surveys conducted as part of the 5-Year Review process. For codes that the RUC has not yet reviewed, the original data from the Harvard resource-based RVU system survey are used. Physician time includes time spent on the case prior to, during, and after the procedure. The physician procedure time is multiplied by the frequency that each procedure is performed on Medicare patients by the specialty.

• The total specialty-specific SMS PE for each cost category is the sum, for each direct and indirect cost category, of all of the procedure-specific total PEs.

Step 2—Calculation of CPEP Cost Pool

CPEP data provide expenditure amounts for the direct expense categories (clinical labor, supplies and equipment cost) at the procedure level. Multiplying the CPEP procedure-level PEs for each of these three categories by the number of times the specialty provided the procedure, produces a total category cost, per procedure, for that specialty. The sum of the total expenses from each procedure results in the total CPEP category cost for the specialty.

Step 3—Calculation and Application of Scaling Factors

This step ensures that the total of the CPEP costs across all procedures performed by the specialty equates with the total direct costs for the specialty as reflected by the SMS data. To accomplish this, the CPEP data are scaled to SMS data by a scaling factor so that the total CPEP costs for each specialty equals the total SMS cost for the specialty. (The scaling factor is calculated by dividing the specialty's SMS pool by the specialty's CPEP pool.)

The unscaled CPEP cost per procedure value, at the direct cost level, is then multiplied by the respective specialty scalar to yield the scaled CPEP procedure value. The sum of the scaled CPEP direct cost pool expenditures equals the total scaled direct expense for the specific procedure at the specialty level.

Step 4—Calculation of Indirect Expenses

Indirect PEs cannot be directly attributed to a specific service because they are incurred by the practice as a whole. Indirect costs include rent, utilities, office equipment and supplies, and accounting and legal fees. There is not a single, universally accepted approach for allocating indirect practice costs to individual procedure codes. Rather allocation involves judgment in identifying the base or bases that are the best measures of a practice's indirect costs.

To allocate the indirect PEs to a specific service, we use the following methodology:

• The scaled direct expenses and the converted work RVU (the work RVU for the service is multiplied by $34.5030, the 1995 CF) are added together, and then multiplied by the number of services provided by the specialty to Medicare patients;

• The total indirect PEs per specialty are calculated by summing the indirect expenses for all other procedures provided by that specialty.

Step 5—Calculation and Application of Indirect Scaling Factors

Similar to the direct costs, the indirect costs are scaled to ensure that the total across all procedures performed by the specialty equates with the total indirect costs for the specialty as reflected by the SMS data. To accomplish this, the indirect costs calculated in Step 4 are scaled to SMS data. The calculation of the indirect scaling factors is as follows:

• The specialty's total SMS indirect expense pool is divided by the specialty's total indirect expense pool calculated in Step 4, to yield the indirect expense scaling factor.

• The unscaled indirect expense amount, at the procedure level, is multiplied by the specialty's scaling factor to calculate the procedure's scaled indirect expenses.

• The sum of the scaled indirect expense amount and the procedure's direct expenses yields the total PEs for the specialty for this procedure.

Step 6—Weighted Average of RVUs for Procedures Performed by More Than One Specialty

For codes that are performed by more than one specialty, a weighted average PE is calculated based on Medicare frequency data of all specialties performing the procedure.

Step 7—Budget Neutrality and Final RVU Calculation

Section 1848(c)(2)(B)(ii)(II) of the Act provides that adjustments in RVUs may not cause total PFS payments to differ by more than $20 million from what they would have been if the adjustments were not made. If the aggregate adjustments to PE RVUs would cause PFS expenditures to exceed the $20 million threshold, the total scaled direct and indirect inputs are then adjusted by a budget neutrality factor (BNF) to calculate RVUs. Budget neutrality for the upcoming year is determined relative to the sum of PE RVUs for the current year. Although the PE RVUs for any particular code may vary from year-to-year, the sum of PE RVUs across all codes is set equal to the current year. The BNF is equal to the sum of the current year's PE RVUs, divided by the sum of the direct and indirect inputs across all codes for the upcoming year. The BNF is applied to (multiplied by) the scaled direct and indirect expenses for each code to set the PE RVU for the upcoming year.

c. Other Methodological Issues: Non-Physician Work Pool (NPWP)

As an interim measure, until we could further analyze the effect of the top-down methodology on the Medicare payment for services with no physician work (including the technical components (TCs) of radiation oncology, radiology and other diagnostic tests), we created a separate PE pool for these services. However, any specialty society could request that its services be removed from the non-physician work pool (NPWP). We will remove services from the NPWP if we find that the requesting specialty provides the service the majority of the time.

NPWP Step 1—Calculation of the SMS Cost Pool for Each Specialty

This step parallels the calculations described above for the standard ''top-down'' PE allocation methodology. For codes in the NPWP, the direct and indirect SMS costs are set equal to the weighted average of the PE/HR for the specialties that provide the services in the pool. Clinical staff time is substituted for physician time in the calculation. The clinical staff time for the code is from CPEP data. Otherwise,

the calculation is similar to the method described previously for codes with physician time.

NPWP Step 2—Calculation of Charge-based PE RVU Cost Pool

The NPWP calculation uses the 1998 (charge-based) PE RVU value for the code, multiplied by the 1995 CF (25.74 × $34.503 = $888.11). The percentage of clinical labor, supplies and equipment are the percentage that each PE category represents for all physicians relative to the total PE for all physicians (calculated from the SMS data).

NPWP Step 3—Calculation and Application of Scaling Factors

After the total cost pools for each specialty and code performed by the specialty are calculated, the steps to ensure the total costs for all of the procedures performed by a specialty do not exceed the total costs for the specialty (scaling) are the same as those described previously for codes with physician work.

NPWP Step 4—Calculation of Indirect Expenses

Because codes in the NPWP do not have work RVUs, indirect expenses are set equal to direct expenses (for codes with physician work, indirect expenses equal the sum of the scaled direct expenses and the converted work RVU). This amount is then multiplied by the number of times the procedure is performed.

NPWP Step 5—Calculation and Application of Indirect Scaling Factors

Similar to the direct costs, the indirect costs are scaled to ensure that the total of the charge-based PE RVU costs across all procedures equates with the total indirect costs as reflected by the SMS data for the NPWP. To accomplish this, the charge-based data are scaled to SMS data so the total charge-based costs equal the total SMS costs.

NPWP Step 6—Budget Neutrality and Final RVU Calculation

Similar to the calculation for codes with physician work, when a budget neutrality adjustment is necessary, the BNF is applied to (multiplied by) the scaled direct and indirect expenses for each code to set the PE RVU for the upcoming year.

d. Facility/Non-facility Costs

Procedures that can be performed in a physician's office, as well as in a hospital have two PE RVUs: Facility and non-facility. The non-facility setting includes physicians' offices, patients' homes, freestanding imaging centers, and independent pathology labs. Facility settings include hospitals, ambulatory surgical centers (ASCs), and skilled nursing facilities (SNFs). The methodology for calculating the PE RVU is the same for both facility and non-facility RVUs, but is applied independently to yield two separate PE RVUs. Because the PEs for services provided in a facility setting are generally included in the payment to the facility (rather than the payment to the physician under the fee schedule), the PE RVUs are generally lower for services provided in the facility setting.

2. PE Proposals Methodology for CY 2006

The following discussions outline the specific PE related proposals for CY 2007.

We have three major goals for our resource-based PE methodology:

- To ensure that the PE portion of PFS payments reflect, to the greatest extent possible, the relative resources required for each of the services on the PFS. This could only be accomplished by using the best available data to calculate the PE RVUs.
- To develop a payment system for PE that is understandable and at least somewhat intuitive, so that specialties could better predict the impacts of changes in the PE data.
- To stabilize the PE portion of PFS payments so that changes in PE RVUs do not produce large fluctuations in the payment for given procedures from year-to-year.

These goals have also been supported in numerous comments we have received from the medical community.

In the CY 2006 PFS proposed rule (70 FR 45764), we proposed the following changes to the PE methodology that we believed would help in achieving our three major goals (stated above in this section):

- Using the PE/HR data from seven specialty-specific supplementary surveys.
- Calculating the direct PE using a bottom-up methodology.
- Eliminating the NPWP.

We also proposed an indirect PE methodology that was to assign to each service the higher of the current indirect PE RVUs or the indirect PE RVUs calculated using the supplementary survey data.

In the CY 2006 PFS final rule with comment period (70 FR 70116), we withdrew these proposals primarily because a programming error for the indirect PE RVU calculation had led to the publication of inaccurate proposed PE RVUs. On February 15, 2006, we sponsored a PE Town Hall Meeting and invited the public, including all specialty representatives to attend. At this meeting, we supplied a detailed description of the bottom-up approach to the calculation of resource-based PE RVUs. Three examples were examined in detail that illustrated the impact of the various assumptions that could be used under a bottom-up approach. We specifically requested input from all interested parties on possible changes to our PE methodology, including the move to a bottom-up approach and the various methods of calculating indirect PE.

We have reviewed the approximately 35 comments that we received in response to our solicitation. Many of the comments were combined efforts from related specialty organizations. Additionally, the AMA RUC also supplied a letter that captured the comments of nearly 30 specialty organizations. The following is a summary of some of the comments we received.

- Delaying Implementation of Changes to the Current PE Methodology: There were mixed opinions from commenters on whether we should proceed with a proposal to use a bottom-up approach. Some commenters emphasized that the CPEP data has been refined and is now the best available source of data, and asserted that it should be used for the calculation of resource-based PE RVUs. Other comments suggested a delay in changing to a bottom-up approach because of the other issues that are affecting PFS payments this year (such as, the effect of imaging payment provisions in the Deficit Reduction Act (DRA), the impact of the negative update, and the uncertainty regarding the impact of the 5-Year Review of work RVUs).
- Transition to a Bottom-Up Approach: The majority of commenters requested a minimum one-year transition to a maximum 3-year transition period to fully implement any change to a bottom-up approach. All of the commenters supported a transition period whether or not they supported the implementation of a bottom-up approach.
- Use of Supplemental Survey Data: A large number of commenters stated that, irrespective of what we propose for 2007, the supplemental survey data that has already been accepted should be used. Other commenters believed that the supplemental survey data grossly overstated PEs and should not be utilized in the development of resource based PE RVUs.
- Multi-Specialty PE Survey: The majority of commenters supported the construction and use of a multi-

specialty survey to collect PE data. Commenters believed that the supplemental survey data is inflated and that the SMS survey data are outdated.

• Review Equipment Utilization Assumptions and Interest Rates: Many commenters supported the review and revision of both the current utilization assumptions and the interest rates associated with high cost equipment. Commenters had mixed reactions as to whether the utilization rates should be higher or lower, and some suggested that we review the possibility of equipment-specific utilization assumptions for the future. Most commenters believed that the current 11 percent interest rate is significantly higher then the actual interest rates and many commenters suggested a rate of approximately prime plus 2 percent.

• Proxy Work RVUs for No Physician Work Services: Commenters were divided on the assignment of a proxy work RVU to services that contain no physician work. Some commenters believed that no physician work services are unfairly penalized under any bottom-up approach, while other comments stated that the inclusion of a proxy work RVU would double count the clinical labor associated with the no physician work services.

After considering the comments we received on the CY 2006 PFS proposed rule (70 FR 45764) and in response to comments received during and following the Town Hall meeting, we believe that the use of a bottom-up methodology for direct costs, use of the supplementary survey data and elimination of the NPWP would assist us in meeting our goal of a PE methodology that is equitable, understandable and stable. Therefore, we are again proposing these changes to our PE methodology. We are also proposing a change in the methodology used to calculate the indirect PE for each service that is different than previously proposed. The following is a summary of our proposals.

a. Use a Bottom-Up Method to Calculate the Direct PEs

We believe that we have consistently made a good faith effort to ensure fairness in our PE RVU-setting system by using the best data available at any one time. The reason we did not adopt the bottom-up methodology originally proposed in 1997 and instead adopted the top-down methodology finalized in 1998 was because we recognized the concerns among the physician community that the resource input data developed in 1995 by the CPEP were less reliable than the aggregate specialty cost data derived from the SMS process.

However, the situation has now changed. The PEAC/PERC/RUC has completed the refinement of the original CPEP data and we believe that the refined PE inputs now, in general, accurately capture the relative direct costs of performing PFS services. Conversely, although we have now accepted supplementary survey data from 13 specialties, we have not received updated aggregate cost data from most specialties. Thus, we believe that, in the aggregate, the refined CPEP data represent more reliably the relative direct cost PE inputs for physicians' services.

Therefore, instead of using the top-down approach to calculate the direct PE RVUs, where the aggregate CPEP/RUC costs for each specialty are scaled to match the aggregate SMS costs, we propose to adopt a bottom-up method of determining the relative direct costs for each service. Under this method, the direct costs would be determined by adding the costs of the resources (that is, the clinical staff, equipment and supplies) typically required to provide the service. The costs of the resources, in turn, would be calculated from the refined CPEP/RUC inputs in our PE database.

We believe that this proposed change, which was welcomed by most commenters in the CY 2006 PFS proposed rule, will lead to greater stability and accuracy in the PE portion of our payment system. Currently, under the top-down methodology, the need to scale the CPEP costs to equal the SMS costs meant that any changes in the direct PE inputs for one service often leads to unexpected results for other services where the inputs had not been altered. In addition, the current PE RVUs for a procedure do not necessarily change proportionately with changes in the direct inputs, creating possible anomalous values. We believe that our proposed bottom-up methodology would resolve these issues, so that changes in the PE RVUs would be more intuitive and would result in fewer surprises.

b. Use the PE/HR Data From the Seven Surveys We Have Previously Accepted and, in Addition, Use the PE/HR Data From the Survey Submitted by the National Coalition of Quality Diagnostic Imaging Services (NCQDIS)

As explained in the CY 2005 PFS final rule with comment period (69 FR 66242), we received surveys from the ACC, the ACR, and the ASTRO by March 1, 2004. The data submitted by the ACC and the ACR met our criteria. However, as requested by the ACC and the ACR, we deferred using their data until issues related to the NPWP could be addressed. (The survey data from ASTRO did not meet the precision criteria established for supplemental surveys; therefore, we did not accept or use it in the calculation of PE RVUs for 2005.)

In March 2005, we also received surveys from the Association of Freestanding Radiation Oncology Centers (AFROC), the AUA, the AAD, the JCAAI, the NCQDIS, and a joint survey from the American Gastroenterological Association (AGA), the American Society of Gastrointestinal Endoscopy (ASGE) and the American College of Gastroenterology (ACG).

All the surveys, with the exception of the survey from NCQDIS, met our criteria. Therefore, we proposed in the CY 2006 PFS proposed rule (70 FR 45775) to use the survey data from all the surveys meeting our criteria in the calculation of PE RVUs for 2006; but, as discussed in the CY 2006 PFS final rule with comment period (70 FR 70116) and above in this section, this proposal was not finalized.

We contracted with the Lewin Group (Lewin) to evaluate whether the supplemental survey data that were submitted met our criteria and to make recommendations to us regarding their suitability for use in calculating PE RVUs. As described in the CY 2006 PFS proposed rule (70 FR 45775), Lewin recommended blending the radiation oncology data from the AFROC survey data with the ASTRO survey data submitted in 2004 to calculate the PE/HR. According to Lewin, the goal of the AFROC survey was to represent the population of freestanding radiation oncology centers only. To develop an overall average for the radiation oncology PE pool, the Lewin Group recommended we use the AFROC survey for freestanding radiation oncology centers, and the hospital-based subset of last year's ASTRO survey. We agreed that this blending of the AFROC and ASTRO data was a reasonable way to calculate an average PE/HR that fully reflects the practice of radiation oncology in all settings. Blending the survey data overcame the initial problem that the ASTRO data do not meet the precision criteria as discussed in the CY 2005 PFS final rule (69 FR 66242). In addition, as discussed in the CY 2006 PFS proposed rule (70 FR 45776), blending of the data allowed for a broader base of radiation oncology providers to be represented.

Also, as discussed in the CY 2006 PFS proposed rule (70 FR 45764), Lewin indicated that the survey data submitted

by the NCQDIS on independent diagnostic testing facilities (IDTFs) did not meet our precision criterion. However, upon further analysis, Lewin agreed with NCQDIS' determination that the inclusion of one inaccurate record skewed the findings outside the acceptable precision range. Lewin recalculated the precision level at 8.1 percent of the mean PE/HR (weighted by the number of physicians in the practice). Lewin indicated that the level of precision for the total PE/HR satisfies the level of precision requirement, and recommended acceptance of the survey.

We are now proposing to use the PE/HR data from all of the above surveys, including the NCQDIS survey, in the calculation of the PE RVUs for 2007. We are again proposing for radiation oncology to use the new PE/HR derived from combining the AFROC and ASTRO survey data, as recommended by Lewin.

We propose to use the PE per physician hour figures in Table 52. It should be noted that the relatively high PE per physician hour values for IDTFs result from the fact that there are far fewer hours for this specialty than most others. IDTFs use relatively few physician hours, so the same practice expenses in the numerator divided by the smaller denominator results in considerably higher values for practice expenses per hour. Although these values of PE/HR appear to be outliers, they actually contribute little to the overall value for practice expenses per hour, because the volume of each of the services performed by the IDTFs represents a relatively small percentage of the total services.

TABLE 52.—PRACTICE EXPENSE PER PHYSICIAN HOUR FIGURES

Specialty	Clinical labor	Supplies	Equipment	Administrative expense	Office expense	Other expense
Allergy/Immunology	65.9	22.5	6.3	56.3	65.9	31.1
Cardiology	59.6	25.9	18.6	53.3	52.7	25
Dermatology	40.6	15.4	11	51.5	78.8	28.2
Gastro-enterology	30.2	8.2	5.9	39.6	48.4	13.3
IDTF	111.6	55	302.5	155.5	121.2	189.5
Radiology	29.1	11.3	27.3	37.8	23.9	44.8
Radiation Oncology	49.7	4.8	27.6	26	39.7	28.1
Urology	27.9	14.4	11.2	42.3	53.8	23.4

Section 303(a)(1)(B) of the Medicare Prescription Drug, Improvement, and Modernization Act of 2003 (MMA) (Pub. L. 108–173) added section 1848(c)(2)(I) of the Act to require CMS to use survey data submitted by a specialty group where at least 40 percent of the specialty's payments for Part B services are attributable to the administration of drugs in 2002 to adjust PE RVUs for drug administration services. The statute applies to surveys that include expenses for the administration of drugs and biologicals, and were received by March 1, 2005 for determining the CY 2006 PE RVUs. Section 303(a)(1)(A)(ii) of the MMA also added section 1848(c)(2)(B)(iv)(II) of the Act to provide an exemption from budget neutrality in 2005 and 2006 for any additional expenditures resulting from the use of these surveys. In the Changes to Medicare Payment for Drugs and Physician Fee Schedule Payments for CY 2004 interim final rule published January 7, 2004 (69 FR 1084), we stated that the specialties of urology, gynecology, and rheumatology meet the above criteria. As described in the CY 2006 PFS final rule with comment period (70 FR 70116), we accepted for the purposes of calculating the 2006 PE RVUs for drug administration services the new survey data from the AUA and exempted from the budget neutrality adjustment any impacts of accepting these data for purposes of calculating PE RVUs for drug administration services. (Note: Rheumatology and gynecology did not submit supplemental survey data.)

c. Eliminate the NPWP and Calculate the PE RVUs for All Services Using the Same Methodology

Primarily because of the lack of representative SMS data or accurate direct cost inputs for specialties such as radiology and radiation oncology, the adoption of the top-down approach necessitated the creation of the NPWP. This separate work pool was created to allocate PE RVUs for TC codes and codes that are not performed by physicians and, thus, have no work RVUs. In the CY 2000 Physician Fee Schedule; Payment Policies and Relative Value Unit Adjustment final rule, we indicated that ''the purpose of this pool was only to protect the (TC) services from the substantial decreases'' caused by inaccurate CPEP data and the lack of physician work RVU in the allocation of the indirect costs (64 FR 59406). Unfortunately, the services priced by the NPWP methodology have proven to be especially vulnerable to any change in the work pool's composition. This has led to significant fluctuations from year to year in the PE RVUs calculated for these services.

The major specialties comprising the NPWP (radiology, radiation oncology and cardiology) have now submitted supplemental survey data that we have accepted and are proposing to use in their PE calculations. (See the discussion on supplementary surveys above in this section.) Now that we have representative aggregate PE data for these specialties, and with the completion of the refinement of the direct cost inputs, the continued necessity and equity of treating these technical services outside the PE methodology applied to other services is questionable.

Therefore, we are proposing to eliminate the NPWP and to calculate the PE RVUs for the services currently in the work pool by the same methodology used for all other services. This would also allow the use of the refined CPEP/RUC data to price the direct costs of individual services, rather than utilizing the pre-1998 charge-based PE RVUs. In addition, this proposal would lead to greater stability for the PE RVUs for these services and would lead to more intuitive results than have occurred with the NPWP methodology.

d. Modify the Current Indirect PE RVUs Methodology

As described previously, the SMS and supplementary survey data are the source for the specialty-specific aggregate indirect costs used in our PE calculations. We then allocate the indirect costs to particular codes on the basis of the direct costs allocated to a code and the work RVUs. In the CY 2006 PFS proposed rule (70 FR 45764), we stated that we had no information that would indicate that the current indirect PE methodology is inaccurate. At that time, we also were not aware of

any alternative approaches or data sources that we could use to calculate more appropriately the indirect PE, other than the new supplementary survey data, which we propose to incorporate into our PE calculations. Therefore, we proposed to use the current indirect PEs in our calculation, incorporating the new survey data into the codes performed by the specialties submitting the surveys. We also indicated in that same proposed rule that we would welcome any suggestions that would assist us in further refinement of this indirect PE methodology. For example, we were considering whether we should continue to accept supplementary survey data or whether it would be preferable and feasible to have an SMS-type survey of only indirect costs for all specialties, or whether a more formula-based methodology independent of the SMS data should be adopted, perhaps using the specialty-specific indirect-to-total cost percentage as a basis of the calculation. For a prior discussion of many of the issues associated with allocating indirect costs, please refer to the CY 2000 Physician Fee Schedule; Payment Policies and Relative Value Unit Adjustment proposed rule (63 FR 30823).

3. Modifications to PE Proposals

As a result of collaboration with the PFS community and public comments on this issue, we are now in a position to propose modifications to the indirect PE methodology.

a. Indirect Percentage Factor: Use of the Specialty-Specific Percentage That Indirect PEs Represent of Total PEs Based on the Survey Data

We currently allocate indirect expenses on the sum of the direct expenses and the work RVUs (converted to dollars by multiplying by the CF). We are proposing to allocate indirect expenses by applying a specialty-specific indirect percentage factor to the direct expenses in order to recognize the varying proportion that indirect costs represent of total costs by specialty. This would have the effect of relatively increasing the indirect expense allocation for services that are on average performed by specialties with higher indirect PE percentages, and relatively decreasing the indirect expense allocation for services that are performed by specialties with lower indirect PE percentages. For a given service, the specific indirect percentage factor to apply to the direct costs for the purpose of the indirect allocation would be calculated as the weighted average of the ratio of the indirect to direct costs (based on the survey data) for the specialties that perform the code. For example, if a service is performed by a single specialty with indirect PEs that were 75 percent of total PEs, the indirect percentage factor to apply to the direct costs for the purposes of the indirect allocation would be (0.75/0.25) = 3.0.

b. Continued Use of the Specialty-Specific Indirect Scaling Factors

As described earlier, we incorporate the indirect PE/HR surveys into the methodology through the use of specialty-specific indirect scaling factors. We would continue to use the specialty-specific indirect scaling factors; however, to apply them in a simpler manner we propose to create an index. This index would reflect the relationship between each specialty's indirect scaling factor and the overall indirect scaling factor for the entire PFS. For example, if a specialty had an indirect practice cost index of 2.00, this specialty would have an indirect scaling factor that was twice the overall average indirect scaling factor. If a specialty had an indirect practice cost index of 0.50, this specialty would have an indirect scaling factor that was half the overall average indirect scaling factor. The calculation and application of the indirect practice cost index is described in more detail below in this section.

c. Use of the Clinical Labor Costs in the Indirect Allocation for a Service When the Clinical Labor Costs are Greater Than the Physician Work RVU

We have received numerous comments that services with little or no physician work RVUs are disadvantaged under our current indirect allocation methodology based on the direct costs and the work RVUs. In response to these comments, when the clinical labor portion of the direct PE RVU is greater than the physician work RVU for a particular service, we are proposing to allocate on the direct costs and the clinical labor costs. For example, if a service has no physician work, the direct PE RVU is 1.10 and the clinical labor portion of the direct PE RVU is 0.65 RVUs, we would use the 1.10 direct PE RVUs and the 0.65 clinical labor portion of the direct PE RVUs for the indirect PE allocation for that service. As another example, if the physician work RVUs for a service are 0.25, the direct PE RVU is 1.10 and the clinical labor portion of the direct PE RVU is 0.65 RVUs, we would use the 1.10 direct PE RVUs and the 0.65 clinical labor RVUs for the indirect allocation for that service. We would not use the 0.25 physician work RVUs for the indirect PE allocation since the 0.65 clinical labor RVUs are greater than the 0.25 physician work RVUs.

d. Use of 2005 Utilization Data in the Indirect PE RVU Calculation

Under the current PE methodology, we predominately use the 1997–2000 utilization data in the calculation of the indirect PE RVUs when the service existed during 1997–2000 or the first year of utilization data if the service did not exist during that time period. We used those years of utilization data primarily to increase the year to year stability of the PE RVUs. With the changes we are proposing to make to PE RVUs, in particular the elimination of the NPWP, we will increase the year-to-year stability of the PE RVUs. We believe it is now appropriate to use updated utilization data in the calculation of the indirect PEs. We believe the other proposed changes in the PE methodology will help obtain the year-to-year stability we were attempting to achieve by continuing to use the older utilization data. Additionally, the use of more current utilization data would reflect the more current practice patterns. We are proposing to use the 2005 utilization data in the calculation of the 2007 indirect PE RVUs. We are also seeking comments on whether the utilization data should be updated yearly, which would increase the accuracy of the PE calculations, or less often, which would increase the stability of the PE RVUs.

e. Elimination of the Special Methodologies for Services With Technical and Professional Components

Under the PFS, when services have technical, professional, and global components that can be billed separately, the payment for the global component equals the sum of the payment for the technical and professional components. Under the current PE methodology, the different mix of specialties that perform the global, technical and professional components can cause the PE RVUs, otherwise created by the methodology, to fail to add together properly; that is, the global component does not equal the sum of the professional and technical components. The global component might exceed the sum of the technical and professional components or it might be less than the sum of the technical and professional components. We ensure that the technical and professional components add to the global component in one of two ways. For services in the NPWP, we set the PE RVUs for the global component equal to the sum of the professional component PE RVU and the technical component

PE RVU. For services outside the NPWP, we set the PE RVUs for the technical component equal to the difference between the global PE RVUs and the professional component RVUs.

With our proposed change to a bottom-up methodology for the direct PEs, there would be no weighted averaging of the direct costs inputs necessary to create the direct PE RVUs and, therefore, the direct PE RVUs for the professional and technical components would sum to the global component. Under the current methodology, as a result of the process used to ensure the professional and technical components sum to the global, RVUs for a service with a global component can be either more or less than the RVUs that would have been calculated for the service if the professional and technical components did not have to sum to the global.

Given the proposed change to bottom-up methodology and the elimination of the NPWP, we believe it is inappropriate to have codes for which the global, and the technical and professional components are assigned RVUs that are either less than or greater than the methodology would otherwise produce, and thus, are paid at a rate that is either less than or greater than the methodology would otherwise specify. (See section II.D.1. of this proposed notice for the discussion of the current methodology.) Therefore, we are proposing that in the calculation of the indirect percentage factor described earlier in section II.D.3.a., we would use a weighted average of the ratio of indirect to direct costs across all the specialties that perform the global, technical, and professional components; that is, we would apply the same weighted average indirect percentage factor to allocate indirect expenses to the global, professional, and technical components for a service. We also propose to utilize a similar weighted averaging approach across all the specialties that perform the components when calculating the indirect PE scaling factor. Because the direct PE RVUs for the technical and professional components sum to the global under the bottom-up methodology, and we are proposing to calculate the indirect percentage factor and the indirect scaling factor so that they do not vary between the technical, professional, and global components, our proposed methodology would create technical and professional components that sum to the global, and no other special methodology would need to be employed.

(i) Proposed PE RVU Methodology

Below is a description of the proposed PE RVU methodology.

(a) Setup File

First, we create a setup file for the PE methodology. The setup file contains the direct cost inputs, the utilization for each procedure code at the specialty and facility/nonfacility place of service level, and the specialty-specific survey PE per physician hour data. Information specific to the creation of the setup file can be found at the end of section II.D.

(b) Calculate the Direct Cost PE RVUs

Sum the costs of each direct input.

Step 1: Sum the direct costs of the inputs for each service. The direct costs consist of the costs of the direct inputs for clinical labor, medical supplies, and medical equipment. The clinical labor cost is the sum of the cost of all the staff types associated with the service; it is the product of the time for each staff type and the wage rate for that staff type. The medical supplies cost is the sum of the supplies associated with the service; it is the product of the quantity of each supply and the cost of the supply. The medical equipment cost is the sum of the cost of the equipment associated with the service; it is the product of the number of minutes each piece of equipment is used in the service and the equipment cost per minute. The equipment cost per minute is calculated as described at the end of this section.

Apply a budget neutrality adjustment to the direct inputs.

Step 2: Calculate the current aggregate pool of direct PE costs. To do this, multiply the current aggregate pool of total direct and indirect PE costs (that is, the current aggregate PE RVUs multiplied by the CF) by the average direct PE percentage from the SMS and supplementary specialty survey data.

Step 3: Calculate the aggregate pool of proposed direct costs. To do this, for all PFS services, sum the product of the direct costs for each service from Step 1 and the utilization data for that service.

Step 4: Using the results of Step 2 and Step 3 calculate a direct PE budget neutrality adjustment so that the proposed aggregate direct cost pool does not exceed the current aggregate direct cost pool and apply it to the direct costs from Step 1 for each service.

Step 5: Convert the results of Step 4 to an RVU scale for each service. To do this, divide the results of Step 4 by the Medicare PFS CF.

(c) Create the Indirect PE RVUs

Create indirect allocators.

Step 6: Based on the SMS and supplementary specialty survey data, calculate direct and indirect PE percentages for each physician specialty.

Step 7: Calculate direct and indirect PE percentages at the service level by taking a weighted average of the results of Step 6 for the specialties that perform the service. Note that for services with technical and professional components we are calculating the direct and indirect percentages across the global, professional and technical components. That is, the direct and indirect percentages for a given service (for example, echocardiogram) do not vary by the professional, technical and global components.

Step 8: Calculate the service level allocators for the indirect PEs based on the percentages calculated in Step 7. The indirect PEs are allocated based on the three components: the direct PE RVU, the clinical PE RVU and the work RVU. (Note that the work RVU used in the calculation includes the separate work budget neutrality adjustment from the 5-Year Review of the work RVUs discussed elsewhere in this proposed notice.)

For most services the indirect allocator is: Indirect percentage * (direct PE RVU/direct percentage) + work RVU.

There are two situations where this formula is modified:

- If the service is a global service (that is, a service with global, professional and technical components), then the indirect allocator is: indirect percentage * (direct PERVU/direct percentage) + clinical PE RVU + work RVU.
- If the clinical labor PE RVU exceeds the work RVU (and the service is not a global service), then the indirect allocator is: indirect percentage * (direct PERVU/direct percentage) + clinical PE RVU.

Note that for global services the indirect allocator is based on both the work RVU and the clinical labor PE RVU. We do this to recognize that, for the professional service, indirect PEs will be allocated using the work RVUs, and for the technical component service, indirect PEs will be allocated using the direct PE RVU and the clinical labor PE RVU. This also allows the global component RVUs to equal the sum of the professional and technical component RVUs.)

For presentation purposes in the examples in the Table 53, the formulas are divided into two parts for each service. The first part does not vary by service and is the indirect percentage * (direct PE RVU/direct percentage). The second part is either the work RVU, clinical PE RVU, or both depending on whether the service is a global service and whether the clinical PE RVU

exceeds the work RVU (as described earlier in this step.)

Apply a budget neutrality adjustment to the indirect allocators.

Step 9: Calculate the current aggregate pool of indirect PE RVUs by multiplying the current aggregate pool of PE RVUs by the average indirect PE percentage from the physician specialty survey data. This is similar to the Step 2 calculation for the direct PE RVUs.

Step 10: Calculate an aggregate pool of proposed indirect PE RVUs for all PFS services by adding the product of the indirect PE allocators for a service from Step 8 and the utilization data for that service. This is similar to the Step 3 calculation for the direct PE RVUs.

Step 11: Using the results of Step 9 and Step 10, calculate an indirect PE adjustment so that the proposed aggregate indirect allocation does not exceed the available aggregate indirect PE RVUs and apply it to indirect allocators calculated in Step 8. This is similar to the Step 4 calculation for the direct PE RVUs.

Calculate the Indirect Practice Cost Index.

Step 12: Using the results of Step 11, calculate aggregate pools of specialty-specific adjusted indirect PE allocators for all PFS services for a specialty by adding the product of the adjusted indirect PE allocator for each service and the utilization data for that service.

Step 13: Using the specialty-specific indirect PE/HR data, calculate specialty-specific aggregate pools of indirect PE for all PFS services for that specialty by adding the product of the indirect PE/HR for the specialty, the physician time for the service, and the specialty's utilization for the service.

Step 14: Using the results of Step 12 and Step 13, calculate the specialty-specific indirect PE scaling factors as under the current methodology.

Step 15: Using the results of Step 14, calculate an indirect practice cost index at the specialty level by dividing each specialty-specific indirect scaling factor by the average indirect scaling factor for the entire PFS.

Step 16: Calculate the indirect practice cost index at the service level to ensure the capture of all indirect costs. Calculate a weighted average of the practice cost index values for the specialties that perform the service. Note that for services with technical and professional components, we calculate the indirect practice cost index across the global, professional and technical components. Under this method, the indirect practice cost index for a given service (for example, echocardiogram) does not vary by the professional, technical and global components.

Step 17: Apply the service level indirect practice cost index calculated in Step 16 to the service level adjusted indirect allocators calculated in Step 11 to get the indirect PE RVU.

(d) Calculate the Final PE RVUs

Step 18: Add the direct PE RVUs from Step 6 to the indirect PE RVUs from Step 17.

Step 19: Calculate and apply the final PE budget neutrality adjustment by comparing the results of Step 18 to the current pool of PE RVUs. This final budget neutrality adjustment is primarily required because certain specialties are excluded from the PE RVU calculation for ratesetting purposes, but all specialties are included for purposes of calculating the final budget neutrality adjustment. (See ''Specialties excluded from rate-setting calculation'' below in this section.)

(e) Setup File Information

- Specialties excluded from rate-setting calculation: For the purposes of calculating the PE RVUs, we exclude certain specialties such as midlevel practitioners paid at a percentage of the PFS, audiology, and low volume specialties from the calculation. This is the same approach used under the current methodology. These specialties are included for the purposes of calculating the budget neutrality adjustment.
- Crosswalk certain low volume physician specialties: Crosswalk the utilization of certain specialties with relatively low PFS utilization to the associated specialties. This is the same approach used under the current methodology.
- Physical therapy utilization: Crosswalk physical therapy utilization to the specialty of physical therapy. This is the same approach used under the current methodology.
- Identify professional and technical services not identified under the usual TC and 26 modifier: Flag the services that are professional and technical component services, but do not use TC and 26 modifiers (for example, electrocardiograms). This flag associates the professional and technical component with the associated global code for use in creating the indirect PE RVU. For example, the professional service code 93010 is associated with the global code 93000.
- Payment modifiers: Payment modifiers are accounted for in the creation of the file. For example, services billed with the assistant at surgery modifier are paid 16 percent of the PFS amount for that service; therefore, the utilization file is modified to only account for 16 percent of any service that contains the assistant at surgery modifier.
- Proposed work RVUs from the 5-Year Review: The setup file contains the proposed work RVUs from the 5-Year Review.

The equipment cost per minute is calculated as:

(f) Equipment Cost Per Minute =

(1/(minutes per year * usage)) * price * ((interest rate/(1 − (1/((1 + interest rate) * life of equipment))) + maintenance)

Where:

Minutes per year = maximum minutes per year if usage were continuous (that is, usage = 1); 150,000 minutes.

Usage = equipment utilization assumption; 0.5.

Price = price of the particular piece of equipment.

Interest rate = 0.11.

Life of equipment = useful life of the particular piece of equipment.

Maintenance = factor for maintenance; 0.05.

TABLE 53: Calculation of PE RVUs under Proposed Methodology For Selected Codes

	Step	Source	Formula	Code with Description							
				99213 Office visit, est Nonfacility	33533 CABG, arterial, single Facility	71020 Chest x-ray Nonfacility	71020 TC Chest x-ray Nonfacility	71020 26 Chest x-ray Nonfacility	93000 ECG, complete Nonfacility	93005 ECG, tracing Nonfacility	93010 ECG, report Nonfacility
(1) Labor cost (Lab)	Step 1	AMA		$13.32	$107.61	$ 5.74	$5.74	$ -----	$6.12	$6.12	$-----
(2) Supply cost (Sup)	Step 1	AMA		$2.98	$10.77	$3.39	$3.39	$-----	$1.19	$1.19	$-----
(3) Equipment cost (Eqp)	Step 1	AMA		$0.19	$1.13	$8.14	$ 8.14	$-----	$0.12	$0.12	$-----
(4) Direct cost (Dir)	Step 1		=(1)+(2)+(3)	$16.50	$119.51	$17.28	$17.28	$-----	$7.43	$7.43	$-----
(5) Direct Adjustment (Dir Adj)	Steps 2-4	See footnote *		0.667	0.667	0.667	0.667	0.667	0.667	0.667	0.667
(6) Adjusted labor	Steps 2-4	=Lab*Dir Adj	=(1)*(5)	$8.88	$71.73	$3.83	$3.83	$------	$4.08	$4.08	$-----
(7) Adjusted supplies	Steps 2-4	=Sup*Dir Adj	=(2)*(5)	$1.99	$7.18	$2.26	$2.26	-----	$0.80	$0.80	-----
(8) Adjusted equipment	Steps 2-4	=Eqp*Dir Adj	=(3)*(5)	$0.13	$0.76	$5.43	$5.43	-----	$0.08	$0.08	-----
(9) Adjusted direct	Steps 2-4		=(6)+(7)+(8)	$11.00	$79.67	$11.52	$11.52	-----	$4.95	$4.95	-----
(10) Conversion Factor (CF)	Step 5	MFS		$37.8975	$37.8975	$37.8975	$37.8975	$37.8975	$37.8975	$37.8975	$37.8975
(11) Adjusted labor cost converted)	Step 5	=(Lab*Dir Adj)/CF	=(6)/(10)	0.23	1.89	0.10	0.10	------	0.11	0.11	
(12) Adusted. supply cost converted	Step 5	=(Sup*Dir Adj)/CF	=(7)/(10)	0.05	0.19	0.06	0.06	-----	0.02	0.02	-----
(13) Adjusted equipment cost converted	Step-5	=(Eqp*Dir Adj)/CF	=(8)/(10)	0.00	0.02	0.14	0.14	-----	0.00	0.00	-----
(14) Adjusted direct cost converted	Step 5		=(11)+(12)+(13)	0.29	2.10	0.30	0.30	-----	0.13	0.13	-----
(15) Adjusted Work RVU	Setup File	MFS (5-Year Review)		0.83	33.65	0.20	------	0.20	0.15	------	0.15

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	Step	Source	Formula	Code with Description							
				99213 Office visit, est Nonfacility	33533 CABG, arterial, single Facility	71020 Chest x-ray Nonfacility	71020 TC Chest x-ray Nonfacility	71020 26 Chest x-ray Nonfacility	93000 ECG, complete Nonfacility	93005 ECG, tracing Nonfacility	93010 ECG, report Nonfacility
(15) Direct percentage	Steps 6,7	Survey data		33.9%	32.6%	38.0%	38.0%	38.0%	37.6%	37.6%	37.6%
(17) Indirect Percentage	Steps 6, 7	Survey data		66.1%	67.4%	62.0%	62.0%	62.0%	62.4%	62.4%	62.4%
(18) Indirect Allocator. formula (1st part)	Step 8	See Step 8		((14)/(16))* (17)	((14)/(16))* (17)	((14)/(16))* (17)	((14)/(16))* (17)	((14)/(16))* (17)	((14)/(16))* (17)	((14)/(16))* (17)	((14)/(16))* (17)
(19) Individual Allocator (1st part)	Step 8		See (18)	0.57	4.35	0.50	0.50	-----	0.22	0.22	
(20) Indirect Allocator formulas (2nd part)	Step 8	See Step 8		(15)	(15)	(15)+(11)	(11)	(15)	(15)+(11)	(11)	(15)
(21) Indirect Allocator (2nd part)	Step 8		See (20)	0.83	33.65	0.30	0.10	0.20	0.26	0.11	0.15
(22) Indirect Allocator (1st+2nd)	Step 8		=(19)+(21)	1.40	38.00	0.80	0.60	0.20	0.48	0.32	0.15
(23) Indirect Adjustment (Ind Adj)	Steps 9-11	See footnote**		0.354	0.354	0.354	0.354	0.354	0.354	0.354	0.354
(24) Adjusted Indirect Allocator	Steps 9-11	=Ind Alloc * Ind Adj		0.49	13.45	0.28	0.21	0.07	0.17	0.11	0.05
(25) Indirect Practice Cost Index (PCI)	Steps 12-16	See Steps 12-16		0.943	0.972	1.026	1.026	1.026	1.300	1.300	1.300
(26) Adjusted Indirect	Step 17	= Adj. Ind Alloc*PCI	=(24)*(25)	0.47	13.07	0.29	0.22	0.07	0.22	0.15	0.07
(27) PE RVU	Steps 18, 19	=(Adj Dir+Adj Ind)*budget neutrality adj.	=((14)+(26))* budget neutrality. adj.	0.76	15.18	0.59	0.52	0.07	0.35	0.28	0.07

* The direct adj = [current pe rvus * CF * avg dir pct] / [sum direct inputs] = [Step 2] / [Step 3]
** The indirect adj = [current pe rvus * avg ind pct] / [sum of ind allocators] = [Step 9] / [Step 10]

(ii) Transition the Resulting Revised PE RVUs over a Four-Year Period

A complete analysis of the impacts of these changes is contained in the impact analysis in section V. of this proposed rule. We are concerned that, when combined with a proposed negative update factor for CY 2007 and the proposed changes to the work RVUs under the 5-Year Review, the shifts in some of the PE RVUs resulting from the immediate implementation of our proposals could potentially cause some disruption for medical practices. Therefore, we are proposing to transition the proposed PE changes over a 4-year period. This would also give ample opportunity for us, as well as the medical specialties and the RUC, to identify any anomalies in the PE data, to make any further appropriate revisions, and to collect additional data as needed prior to the full implementation of the proposed PE changes.

During the transition period, the PE RVUs would be calculated on the basis of a blend of RVUs calculated using our proposed methodology described above (weighted by 25 percent during CY 2007, 50 percent during CY 2008, 75 percent during CY 2009, and 100 percent thereinafter), and the current CY 2006 PE RVUs for each existing code. PE RVUs for codes that are new during this period would be calculated using only the proposed methodology, and paid at the fully transitioned rate. We believe that implementing all of these proposed changes would further our goal of producing a more accurate, more intuitive and more stable PE methodology.

For example, as stated above in this section, now that the direct PE inputs have been refined, we believe that the proposed CPEP/RUC direct input data are superior to the specialty-specific SMS PE/HR data for the purposes of determining the typical direct PE resources required to perform each service on the PFS. First, we have received recommendations on the procedure-specific inputs from the multi-specialty PEAC that were based on presentations from the relevant specialties, after the inputs were closely scrutinized by the PEAC using standards and packages that were agreed upon by all involved specialties. Second, the refined CPEP/RUC data are more current than the aggregate specialty-specific data for the majority of specialties. Third, for direct costs, we believe that it is reasonable to assume that the costs of the clinical staff, supplies and equipment are the same for a given service, regardless of the specialty that is performing it. This does not happen under the top-down direct cost methodology, where the specialty-specific scaling factors can create differing direct costs for the same service.

We also believe the proposed methodology is less confusing and more intuitive than the current approach. First, the NPWP would be eliminated and all services would be priced using one methodology, eliminating the complicated calculations needed to price NPWP services. Second, any revisions made to the direct inputs for one or more services would now have predictable results. Changes in the direct practice inputs for a service would proportionately change the PE RVUs for that service without significantly affecting the PE RVUs for unrelated services (except, of course, to the extent that a budget neutrality adjustment is required to be applied by the statute).

The proposed methodology would also create a system that would be significantly more stable from year-to-year than the current approach. Specialties should no longer experience the wide fluctuations in payment for a given service due to an aberrant direct cost scaling factor. Direct PEs should only change for a service if the service is further refined or when prices are updated, while indirect PEs should change only when there are changes in the mix of specialties furnishing the service or if any future new survey data for indirect costs are utilized.

We recognize that there may be some outstanding issues that need further consideration, and we welcome input from the medical community regarding those issues. We also believe the proposed transition period would give us the opportunity to work with the affected specialties to collect any needed data or to determine whether further revisions to our PE methodology are needed before payment is based entirely on the proposed methodology. As we gain experience with the new methodology, we will reexamine this policy beginning next year and propose necessary revisions through future rulemaking.

Therefore, we welcome all comments on these proposed changes, particularly those concerning additional modifications to the indirect PE methodology that might help us further our intended goals.

III. Collection of Information Requirements

This document does not impose information collection and recordkeeping requirements. Consequently, it need not be reviewed by the Office of Management and Budget under the authority of the Paperwork Reduction Act of 1995 (44 U.S.C. 3501 *et seq.*)

IV. Response to Comments

Because of the large number of public comments we normally receive on **Federal Register** documents, we are not able to acknowledge or respond to them individually. We will consider all comments received by the date and time specified in the **DATES** section of this preamble, and, we will respond to the comments in the CY 2007 Physician Fee Schedule final rule with comment period.

V. Regulatory Impact Analysis

[If you choose to comment on issues in this section, please include the caption ''REGULATORY IMPACT ANALYSIS'' at the beginning of your comments.]

A. Overall Impact

We have examined the impacts of this proposed notice as required by Executive Order 12866 (September 1993, Regulatory Planning and Review), the Regulatory Flexibility Act (RFA) (September 19, 1980, Pub. L. 96–354), section 1102(b) of the Social Security Act, the Unfunded Mandates Reform Act of 1995 (Pub. L. 104–4), and Executive Order 13132.

Executive Order 12866 (as amended by Executive Order 13258, which merely reassigns responsibilities of duties) directs agencies to assess all costs and benefits of available regulatory alternatives and, if regulation is necessary, to select regulatory approaches that maximize net benefits (including potential economic, environmental, public health and safety effects, distributive impacts, and equity). A regulatory impact analysis (RIA) must be prepared for major rules with economically significant effects ($100 million or more in any 1 year). As indicated in more detail below, we estimate that the PFS work RVU provisions included in this proposed notice will redistribute more than $100 million in one year. We are considering this proposed notice to be economically significant because its provisions are estimated to result in an increase, decrease or aggregate redistribution of Medicare spending that will exceed $100 million. Therefore, this proposed notice is a major rule and we have prepared a regulatory impact analysis.

The RFA requires agencies to analyze options for regulatory relief of small businesses. For purposes of the RFA, small entities include small businesses,

nonprofit organizations, and small governmental jurisdictions. Most hospitals and most other providers and suppliers are small entities, either by nonprofit status or by having revenues of $6 million to $29 million in any one year. We prepare a regulatory flexibility analysis unless we certify that a rule would not have a significant economic impact on a substantial number of small entities. The analysis must include a justification concerning the reason action is being taken, the kinds and number of small entities the rule affects, and an explanation of any meaningful options that achieve the objectives with less significant adverse economic impact on the small entities.

Section 1102(b) of the Act requires us to prepare a regulatory impact analysis if a rule may have a significant impact on the operations of a substantial number of small rural hospitals. This analysis must conform to the provisions of section 603 of the RFA. For purposes of section 1102(b) of the Act, we define a small rural hospital as a hospital that is located outside a Metropolitan Statistical Area and has fewer than 100 beds. For purposes of the RFA, physicians, nonphysician practitioners, and suppliers are considered small businesses if they generate revenues of $6 million or less. Approximately 95 percent of physicians are considered to be small entities. There are over 980,000 physicians, other practitioners and medical suppliers that receive Medicare payment under the PFS. The analysis and discussion provided in this section, as well as elsewhere in this proposed notice, complies with the RFA requirements.

Section 202 of the Unfunded Mandates Reform Act of 1995 also requires that agencies assess anticipated costs and benefits before issuing any rule whose mandates require spending in any one year of $100 million in 1995 dollars, updated annually for inflation. That threshold level is currently approximately $120 million. Medicare beneficiaries are considered to be part of the private sector for this purpose. A discussion concerning the impact of this proposed notice on beneficiaries is found later in this section.

Executive Order 13132 establishes certain requirements that an agency must meet when it issues a proposed rule (and subsequent final rule) that imposes substantial direct requirement costs on State and local governments, preempts State law, or otherwise has Federalism implications.

We have examined this proposed notice in accordance with Executive Order 13132 and have determined that this regulation would not have any significant impact on the rights, roles, or responsibilities of State, local, or tribal governments. A discussion concerning the impact of this proposed notice on beneficiaries is found later in this section.

B. Anticipated Effects

We have prepared the following analysis, which, together with the information provided in the rest of this preamble, meets all assessment requirements. It explains the rationale for and purposes of the proposed notice; details the costs and benefits of the rule; analyzes alternatives; and presents the measures we propose to use to minimize the burden on small entities.

Section 1848(c)(2)(B)(ii) of the Act requires that increases or decreases in RVUs may not cause the amount of expenditures for the year to differ by more than $20 million from what expenditures would have been in the absence of these changes. If this threshold is exceeded, we make adjustments to preserve budget neutrality. This year, the estimated $4 billion impact of proposed changes in work RVUs resulting from the 5-year refinement will require that a budget-neutrality adjustment be made. Revisions in payment policies, including the establishment of interim and final RVUs for coding changes that will be announced later this year, may result in additional budget-neutrality adjustments.

We considered making the statutorily required budget-neutrality adjustment to account for the 5-Year Review of physician work by reducing all work RVUs. We estimate that all work RVUs would have to be reduced by 10 percent under this option. Alternatively, we considered making the budget neutrality adjustment to the PFS CF. This option would require an estimated 5 percent reduction in the CF and would also affect services that do not have work RVUs, and were thus not part of the 5-Year Review. Therefore, to confine the impact to services that have physician work RVUs, we are proposing to establish a budget neutrality adjustor that would reduce the work RVUs by an estimated 10 percent to meet the provisions of section 1848(c)(2)(B)(ii) of the Act.

Table 54 shows the specialty-level impact on payment of the work and PE changes discussed in this proposed notice for the CY 2007 Medicare PFS, including the effect of the separate work budget neutrality adjustor discussed above. Because we have proposed a four-year transition for the new PE changes, we also show the impact of the fully implemented PE changes in 2010. Our estimates of changes in Medicare revenues for PFS services compare payment rates for 2006 with proposed payment rates for 2007 and 2010 using 2005 Medicare utilization for all years. These impacts do not include estimates of the annual updates to the Medicare PFS CF for 2007 through 2010. We are using 2005 Medicare claims processed and paid through March 30, 2005, that we estimate are 98 percent complete. Using a single year of utilization, as opposed to multiple years, limits the estimated changes to the proposed work and PE. This approach is consistent with the methodology outlined in section II.D.3.d. of this proposed notice, ''Use of 2005 utilization data in the indirect PE RVU calculation.'' To the extent that there are year-to-year changes in the volume and mix of services provided by physicians, the actual impact on total Medicare revenues will be different than those shown here. The payment impacts reflect averages for each specialty based on Medicare utilization. The payment impact for an individual physician would be different from the average, based on the mix of services the physician provides. The average change in total revenues would be less than the impact displayed here because physicians furnish services to both Medicare and non-Medicare patients and specialties may receive substantial Medicare revenues for services that are not paid under the PFS. For instance, independent laboratories receive approximately 80 percent of their Medicare revenues from clinical laboratory services that are not paid under the PFS.

Table 54 shows only the payment impact on PFS services. The following is an explanation of the information represented in Table 54:

- Specialty: The physician specialty or type of practitioner/supplier.
- Allowed Charges: Allowed charges are the Medicare Fee Schedule amounts for covered services and include co-payments and deductibles (which are the financial responsibility of the beneficiary). These amounts have been summed across all services provided by physicians, practitioners or suppliers with a specialty to arrive at the total allowed charges for the specialty.
- Impact of Work RVU Changes: The percentage increase or decrease in allowed charges attributed to changes in the valuation of physician/clinical work for the given specialty.
- Impact of PE RVU Changes: The percentage increase or decrease in allowed charges attributed to changes in the valuation of practice expense for the services provided by physicians,

practitioners or suppliers within each specialty (shown in the first year of phase-in (2007) and at full implementation (2010)).

• Combined impact of Work and PE RVU changes: The percentage increase or decrease in allowed charges attributed to the sum of changes to the valuation of physician/clinical work and the valuation of practice expense for services provided by physicians, practitioners or suppliers within each specialty (shown in the first year of phase-in of PE changes (2007) and at full implementation of PE changes (2010)).

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TABLE 54: Total Allowed Charge Impact for the 5-Year Review of Work RVUs and Proposed PE RVUs

	Specialty	Allowed Charges (millions)	Impact of Work RVU Changes	Impact of PE RVU Changes		Combined Impact of PE and Work Changes*	
			2007	2007 (PE Trans. Year 1)	2010 (PE Full Implement.)	2007 (PE Trans. Year 1)	2010 (PE Full Implement.)
1	Total	$74,749	0%	0%	0%	0%	0%
2	ALLERGY/IMMUNOLOGY	$167	1%	2%	6%	3%	7%
3	ANESTHESIOLOGY	$1,710	-6%	-1%	-4%	-7%	-10%
4	CARDIAC SURGERY	$389	3%	0%	-2%	3%	1%
5	CARDIOLOGY	$7,462	-0%	-1%	-4%	-1%	-4%
6	COLON AND RECTAL SURGERY	$120	-1%	1%	4%	0%	3%
7	CRITICAL CARE	$171	4%	0%	0%	4%	4%
8	DERMATOLOGY	$2,145	-5%	3%	12%	-2%	7%
9	EMERGENCY MEDICINE	$1,989	7%	0%	-2%	7%	5%
10	ENDOCRINOLOGY	$319	6%	0%	0%	6%	6%
11	FAMILY PRACTICE	$4,809	5%	0%	1%	5%	6%
12	GASTROENTEROLOGY	$1,734	-1%	1%	6%	0%	5%
13	GENERAL PRACTICE	$1,016	3%	0%	1%	3%	4%
14	GENERAL SURGERY	$2,321	0%	0%	1%	0%	1%
15	GERIATRICS	$132	2%	0%	-1%	2%	1%
16	HAND SURGERY	$76	-1%	-1%	-4%	-2%	-5%
17	HEMATOLOGY/ONCOLOGY	$1,761	3%	0%	-1%	3%	2%
18	INFECTIOUS DISEASE	$450	8%	1%	2%	9%	10%
19	INTERNAL MEDICINE	$9,510	5%	0%	0%	5%	5%
20	INTERVENTIONAL RADIOLOGY	$233	-5%	-1%	-3%	-6%	-8%
21	NEPHROLOGY	$1,585	0%	-1%	-5%	-1%	-5%
22	NEUROLOGY	$1,331	2%	0%	0%	2%	2%
23	NEUROSURGERY	$571	-1%	-1%	-3%	-2%	-4%
24	NUCLEAR MEDICINE	$86	-6%	0%	-1%	-6%	-7%
25	OBSTETRICS/GYNECOLOGY	$623	1%	0%	-1%	1%	0%
26	OPHTHALMOLOGY	$4,786	-2%	-1%	-4%	-3%	-6%
27	ORTHOPEDIC SURGERY	$3,265	-2%	-1%	-3%	-3%	-5%
28	OTOLARNGOLOGY	$892	0%	0%	-1%	0%	-1%
29	PATHOLOGY	$934	-5%	-1%	-2%	-6%	-7%
30	PEDIATRICS	$73	2%	0%	-1%	2%	1%
31	PHYSICAL MEDICINE	$785	2%	0%	-2%	2%	0%
32	PLASTIC SURGERY	$279	-1%	0%	0%	-1%	-1%
33	PSYCHIATRY	$1,128	-2%	0%	1%	-2%	-1%
34	PULMONARY DISEASE	$1,580	5%	0%	2%	5%	7%
35	RADIATION ONCOLOGY	$1,448	-2%	1%	4%	-1%	2%
36	RADIOLOGY	$5,365	-5%	0%	2%	-5%	-3%
37	RHEUMATOLOGY	$469	3%	-1%	-3%	2%	0%
38	THORACIC SURGERY	$442	2%	0%	-1%	2%	1%
39	UROLOGY	$1,949	1%	0%	0%	1%	1%
40	VASCULAR SURGERY	$606	-1%	0%	2%	-1%	1%
41	AUDIOLOGIST	$31	-1%	-1%	-3%	-2%	-4%
42	CHIROPRACTOR	$774	-7%	-1%	-4%	-8%	-11%
43	CLINICAL PSYCHOLOGIST	$554	-7%	-2%	-8%	-9%	-15%
44	CLINICAL SOCIAL WORKER	$362	-7%	-2%	-7%	-9%	-14%
45	NURSE ANESTHETIST	$651	-8%	0%	-2%	-8%	-10%
46	NURSE PRACTITIONER	$710	0%	0%	0%	0%	0%
47	OPTOMETRY	$838	-2%	-1%	-3%	-3%	-5%
48	ORAL/MAXILLOFACIAL SURGERY	$37	-2%	1%	4%	-1%	2%
49	PHYSICAL/OCCUPATIONAL THERAPY	$1,593	-6%	2%	8%	-4%	2%
50	PHYSICIANS ASSISTANT	$537	1%	0%	0%	1%	1%
51	PODIATRY	$1,541	-3%	2%	6%	-1%	3%
52	DIAGNOSTIC TESTING FACILITY	$1,214	-1%	-1%	-4%	-2%	-5%
53	INDEPENDENT LABORATORY	$665	-2%	5%	21%	3%	19%
54	PORTABLE X-RAY SUPPLIER	$87	-1%	2%	9%	1%	8%

*Components may not sum to total due to rounding.

This is the third 5-Year Review of physician work RVUs. The first 5-Year Review occurred as part of the 1996 regulatory process and was effective for services furnished on or after January 1, 1997. The second 5-Year Review of

physician work RVUs occurred as part of the 2001 regulatory process and was effective for services furnished on or after January 1, 2002. Table 55 compares some basic data points from the three 5-Year Reviews.

TABLE 55:

		1st Five-Year Review Effective January 1, 1997	2nd Five-Year Review Effective January 1, 2002	Proposed 3rd Five-Year Review Effective January 1, 2007
Approximate Number of Services Reviewed		1000 services	870 services	565 services
Range of Impacts	High	+15.0 %	+5.0 %	+8.0 %
	Low	-6.0 %	0.0%	-8.0 %
Estimate of Total Dollar Impact		1.65 billion	1.95 billion	Approximately 4 billion

Note: The magnitude of the proposed 3rd 5-Year Review is directly related to both the mix of services under review and the increase in PFS spending between the 1st 5-Year Review and the proposed 3rd 5-Year Review.

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We are currently developing the CY 2007 PFS proposed rule that will contain our estimate of all other proposed policies and changes that will affect payment for PFS services in CY 2007. We will show the combined impact of all policy and other changes affecting PFS payments in the final CY 2007 PFS rule.

C. Alternatives Considered

This proposed notice discusses the proposed revisions to the work RVUs under the PFS. The preamble provides descriptions of the statutory provisions that are addressed, identifies those areas when discretion has been exercised, presents rationale for our decisions and, where relevant, alternatives that were considered.

D. Impact on Beneficiaries

Overall, we believe these changes would improve beneficiary access to reasonable and necessary services since services would now be more appropriately valued. The payment changes would also affect beneficiary liability. Any changes in aggregate beneficiary liability from a particular work RVU change will be a function of the coinsurance (20 percent if applicable for the particular service after the beneficiary has met the deductible) and the effect of the aggregate impact of the work RVU changes on the calculation of the Medicare Part B premium rate (generally, 25 percent of the aggregate payment change).

E. Accounting Statement

As required by OMB Circular A–4 (available at *http://www.whitehouse.gov/omb/circulars/a004/a-4.pdf*), in Table 56, we have prepared an accounting statement showing the classification of the expenditures associated with the provisions of this proposed notice.

Expenditures are classified as transfers between Medicare providers/suppliers (that is physicians, other practitioners medical suppliers, and providers that receive payment under or based on the PFS) and the Federal government. The −$40 million shown in Table 56 represents the net impact of an increase in FY 2007 payments for mammography and a decrease in FY 2007 payments for physical therapy.

TABLE 56.—ACCOUNTING STATEMENT—CLASSIFICATION OF ESTIMATED EXPENDITURES, FROM FY 2006 TO FY 2007 (IN MILLIONS)

Category	Transfers
Annualized Monetized Transfers From Whom To Whom?	−$40 Providers of physical therapy and mammography services that are paid based on Medicare Physician Fee Schedule to the Federal government.

In accordance with the provisions of Executive Order 12866, this proposed notice was reviewed by the Office of Management and Budget.

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

Dated: May 4, 2006.

Mark B. McClellan,

Administrator, Centers for Medicare & Medicaid Services.

Approved: June 9, 2006.

Michael O. Leavitt,

Secretary.

Note: These addenda will not appear in the Code of Federal Regulations.

Addendum A: Explanation and Use of Addenda B

The addenda on the following pages provide various data pertaining to the Medicare fee schedule for physicians' services furnished in 2007. Addendum B contains the RVUs for work, non-facility PE, facility PE, and malpractice expense, and other information for all services included in the PFS.

In previous years, we have listed many services in Addendum B that are not paid under the PFS. To avoid publishing as many pages of codes for these services, we are not including clinical laboratory codes and most alphanumeric codes (Healthcare Common Procedure Coding System (HCPCS) codes not included in CPT) in Addendum B.

Addendum B—2007 Relative Value Units and Related Information Used in Determining Medicare Payments for 2007

This addendum contains the following information for each CPT code and alphanumeric HCPCS code, except for: alphanumeric codes beginning with B (enteral and parenteral therapy), E (durable medical equipment), K (temporary codes for nonphysicians' services or items), or L (orthotics); and codes for anesthesiology. *The Addendum B included in this proposed notice does not include codes which are carrier priced since the RVUs for these services are set at 0.00.*

Please also note the following:

• An ''NA'' in the ''Non-facility PE RVUs'' column of Addendum B means that CMS has not developed a PE RVU in the non-facility setting for the service because it is typically performed in the hospital (for example, an open heart surgery is generally performed in the hospital setting and not a physician's office).

• Services that have an ''NA'' in the ''Facility PE RVUs'' column of Addendum B are typically not paid using the PFS when provided in a facility setting. These services (which include ''incident to'' services and the technical portion of diagnostic tests) are generally paid under either the outpatient hospital prospective payment system or bundled into the hospital inpatient prospective payment system payment.

1. *CPT/HCPCS code.* This is the CPT or alphanumeric HCPCS number for the service. Alphanumeric HCPCS codes are included at the end of this addendum.

2. *Modifier.* A modifier is shown if there is a technical component (modifier TC) and a professional component (PC) (modifier -26) for the service. If there is a PC and a TC for the service, Addendum B contains three entries for the code. A code for: the global values (both professional and technical); modifier -26 (PC); and, modifier TC. The global service is not designated by a modifier, and physicians must bill using the code without a modifier if the physician furnishes both the PC and the TC of the service.

Modifier-53 is shown for a discontinued procedure. There will be RVUs for the code (CPT code 45378) with this modifier.

3. *Status indicator.* This indicator shows whether the CPT/HCPCS code is in the PFS and whether it is separately payable if the service is covered.

A = Active code. These codes are separately payable under the PFS if covered. There will be RVUs for codes with this status. The presence of an ''A'' indicator does not mean that Medicare has made a national coverage determination regarding the service. Carriers remain responsible for coverage decisions in the absence of a national Medicare policy.

B = Bundled code. Payments for covered services are always bundled into payment for other services not specified. If RVUs are shown, they are not used for Medicare payment. If these services are covered, payment for them is subsumed by the payment for the services to which they are incident (an example is a telephone call from a hospital nurse regarding care of a patient).

C = Carrier-priced code. Carriers will establish RVUs and payment amounts for these services, generally on an individual case basis following review of documentation, such as an operative report.

D = Deleted/discontinued code. These codes are deleted effective with the beginning of the CY and are always subject to a 90-day grace period.

E = Excluded from the PFS by regulation. These codes are for items and services that CMS excludes from payment under the PFS by regulation. No RVUs are shown, and no payment may be made under the PFS for these codes. Payment for them, when covered, continues under reasonable charge procedures.

F = Deleted/discontinued codes. (Code not subject to a 90-day grace period.) These codes are deleted effective with the beginning of the CY and are never subject to a grace period. This indicator is no longer effective as of January 1, 2006.

G = Code not valid for Medicare purposes. Medicare does not recognize codes assigned this status. Medicare uses another code for reporting of, and payment for, these services. (Codes subject to a 90-day grace period.) This indicator is no longer effective with the 2006 PFS as of January 1, 2006.

H = Deleted modifier. For 2000 and later years, either the TC or PC component shown for the code has been deleted or the deleted component is shown in the database with the H status indicator.

I = Not valid for Medicare purposes. Medicare uses another code for the reporting of, and the payment for these services. (Codes not subject to a 90-day grace period.)

N = Noncovered service. These codes are noncovered services. Medicare payment may not be made for these codes. If RVUs are shown, they are not used for Medicare payment.

P = Bundled or excluded code. There are no RVUs for these services. No separate payment is made for them under the PFS.

—If the item or service is covered as incident to a physician's service and is furnished on the same day as a physician's service, payment for it is bundled into the payment for the physician's service to which it is incident (an example is an elastic bandage furnished by a physician incident to a physician's service).

—If the item or service is covered as other than incident to a physician's service, it is excluded from the PFS (for example, colostomy supplies) and is paid under the other payment provisions of the Act.

R = Restricted coverage. Special coverage instructions apply. If the service is covered and no RVUs are shown, it is carrier-priced.

T = There are RVUs for these services, but they are only paid if there are no other services payable under the PFS billed on the same date by the same provider. If any other services payable under the PFS are billed on the same date by the same provider, these services are bundled into the service(s) for which payment is made.

X = Exclusion by law. These codes represent an item or service that is not within the definition of ''physicians' services'' for PFS payment purposes. No RVUs are shown for these codes, and no payment may be made under the PFS. (Examples are ambulance services and clinical diagnostic laboratory services.)

4. *Description of code.* This is an abbreviated version of the narrative description of the code.

5. *Physician work RVUs.* These are the RVUs for the physician work for this service in 2007. The RVUs for codes with a 10- or 90-day global period reflect the application of the RUC-recommended values for the E/M services that are included as part of the global period for the service. Codes that are not used for Medicare payment are identified with a ''+.'' **Note:** The separate budget neutrality adjustor is *not* reflected in these physician work RVUs.

6. *Fully implemented non-facility practice expense RVUs.* These are the fully implemented resource-based PE RVUs for non-facility settings.

7. *Transitional Non-facility practice expense RVUs.* These are the 2007 resource-based PE RVUs for non-facility settings.

8. *Fully implemented facility practice expense RVUs.* These are the fully implemented resource-based PE RVUs for facility settings.

9. *Transitional facility practice expense RVUs.* These are the 2007 resource-based PE RVUs for facility settings.

10. *Malpractice expense RVUs.* These are the RVUs for the malpractice expense for the service for 2006.

11. *Non-facility total.* This is the sum of the work, fully implemented non-facility PE, and malpractice expense RVUs.

12. *Transitional non-facility total.* This is the sum of the work, 2007 transitional non-facility PE, and malpractice expense RVUs.

13. *Facility total.* This is the sum of the work, fully implemented facility PE, and malpractice expense RVUs.

14. *Transitional facility total.* This is the sum of the work, 2007 transitional facility PE, and malpractice expense RVUs.

15. *Global period.* This indicator shows the number of days in the global period for the code (0, 10, or 90 days). An explanation of the alpha codes follows:

MMM = Code describes a service furnished in uncomplicated maternity cases including antepartum care, delivery, and postpartum care. The usual global surgical concept does not apply. See the 1999 Physicians' CPT for specific definitions.

XXX = The global concept does not apply.

YYY = The global period is to be set by the carrier (for example, unlisted surgery codes).

ZZZ = Code related to another service that is always included in the global period of the other service. (Note: Physician work and PE are associated with intra service time and in some instances the post service time.)

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
0073T		A	Radiation tx delivery, imrt	0.00	13.15	16.84	NA	NA	0.13	13.28	16.97	NA	NA	XXX
10021		A	Fna w/o image	1.27	2.11	2.15	0.35	0.49	0.10	3.48	3.52	1.72	1.86	XXX
10022		A	Fna w/image	1.27	2.21	2.47	0.40	0.42	0.08	3.56	3.82	1.75	1.77	XXX
10040		A	Acne surgery	1.18	1.28	1.08	0.95	0.83	0.05	2.51	2.31	2.18	2.06	010
10060		A	Drainage of skin abscess	1.17	1.49	1.28	1.07	0.97	0.12	2.78	2.57	2.36	2.26	010
10061		A	Drainage of skin abscess	2.40	2.05	1.89	1.49	1.50	0.26	4.71	4.55	4.15	4.16	010
10080		A	Drainage of pilonidal cyst	1.17	2.63	2.99	1.08	1.10	0.11	3.91	4.27	2.36	2.38	010
10081		A	Drainage of pilonidal cyst	2.45	3.46	3.93	1.42	1.48	0.24	6.15	6.62	4.11	4.17	010
10120		A	Remove foreign body	1.22	2.09	2.16	0.93	0.96	0.12	3.43	3.50	2.27	2.30	010
10121		A	Remove foreign body	2.69	3.49	3.51	1.62	1.75	0.33	6.51	6.53	4.64	4.77	010
10140		A	Drainage of hematoma/fluid	1.53	2.25	1.90	1.28	1.29	0.19	3.97	3.62	3.00	3.01	010
10160		A	Puncture drainage of lesion	1.20	1.85	1.66	1.07	1.08	0.14	3.19	3.00	2.41	2.42	010
10180		A	Complex drainage, wound	2.25	3.28	3.06	1.81	1.95	0.35	5.88	5.66	4.41	4.55	010
11000		A	Debride infected skin	0.60	0.72	0.62	0.16	0.21	0.07	1.39	1.29	0.83	0.88	000
11001		A	Debride infected skin add-on	0.30	0.23	0.23	0.08	0.10	0.04	0.57	0.57	0.42	0.44	ZZZ
11004		A	Debride genitalia & perineum	10.31	NA	NA	3.00	3.68	0.67	NA	NA	13.98	14.66	000
11005		A	Debride abdom wall	13.75	NA	NA	3.98	5.18	0.96	NA	NA	18.69	19.89	000
11006		A	Debride genit/per/abdom wall	12.61	NA	NA	3.55	4.53	1.28	NA	NA	17.44	18.42	000
11008		A	Remove mesh from abd wall	5.00	NA	NA	1.33	1.86	0.61	NA	NA	6.94	7.47	ZZZ
11010		A	Debride skin, fx	4.19	6.71	6.85	2.29	2.55	0.66	11.56	11.70	7.14	7.40	010
11011		A	Debride skin/muscle, fx	4.94	7.04	7.90	2.01	2.27	0.74	12.72	13.58	7.69	7.95	000
11012		A	Debride skin/muscle/bone, fx	6.87	8.91	11.33	3.05	3.65	1.16	16.94	19.36	11.08	11.68	000
11040		A	Debride skin, partial	0.50	0.68	0.56	0.16	0.20	0.06	1.24	1.12	0.72	0.76	000
11041		A	Debride skin, full	0.82	0.77	0.69	0.24	0.31	0.10	1.69	1.61	1.16	1.23	000
11042		A	Debride skin/tissue	1.12	1.04	0.99	0.33	0.41	0.13	2.29	2.24	1.58	1.66	000
11043		A	Debride tissue/muscle	3.00	3.61	3.45	2.68	2.62	0.32	6.93	6.77	6.00	5.94	010
11044		A	Debride tissue/muscle/bone	4.05	4.91	4.57	3.64	3.73	0.43	9.39	9.05	8.12	8.21	010
11055		R	Trim skin lesion	0.43	0.81	0.62	0.11	0.16	0.05	1.29	1.10	0.59	0.64	000
11056		R	Trim skin lesions, 2 to 4	0.61	0.88	0.70	0.15	0.21	0.07	1.56	1.38	0.83	0.89	000
11057		R	Trim skin lesions, over 4	0.79	0.99	0.80	0.20	0.28	0.10	1.88	1.69	1.09	1.17	000
11100		A	Biopsy, skin lesion	0.81	1.86	1.40	0.38	0.37	0.03	2.70	2.24	1.22	1.21	000
11101		A	Biopsy, skin add-on	0.41	0.40	0.35	0.19	0.19	0.02	0.83	0.78	0.62	0.62	ZZZ
11200		A	Removal of skin tags	0.77	1.21	1.08	0.88	0.79	0.04	2.02	1.89	1.69	1.60	010
11201		A	Remove skin tags add-on	0.29	0.16	0.16	0.11	0.12	0.02	0.47	0.47	0.42	0.43	ZZZ
11300		A	Shave skin lesion	0.51	1.18	1.04	0.20	0.21	0.03	1.72	1.58	0.74	0.75	000
11301		A	Shave skin lesion	0.85	1.48	1.20	0.37	0.38	0.04	2.37	2.09	1.26	1.27	000
11302		A	Shave skin lesion	1.05	1.75	1.41	0.47	0.46	0.05	2.85	2.51	1.57	1.56	000
11303		A	Shave skin lesion	1.24	1.99	1.68	0.53	0.52	0.07	3.30	2.99	1.84	1.83	000
11305		A	Shave skin lesion	0.67	1.05	0.90	0.20	0.25	0.07	1.79	1.64	0.94	0.99	000
11306		A	Shave skin lesion	0.99	1.40	1.18	0.37	0.41	0.07	2.46	2.24	1.43	1.47	000
11307		A	Shave skin lesion	1.14	1.68	1.39	0.46	0.48	0.07	2.89	2.60	1.67	1.69	000
11308		A	Shave skin lesion	1.41	1.72	1.52	0.50	0.57	0.13	3.26	3.06	2.04	2.11	000
11310		A	Shave skin lesion	0.73	1.37	1.18	0.31	0.32	0.04	2.14	1.95	1.08	1.09	000
11311		A	Shave skin lesion	1.05	1.62	1.33	0.47	0.49	0.05	2.72	2.43	1.57	1.59	000
11312		A	Shave skin lesion	1.20	1.89	1.54	0.55	0.55	0.06	3.15	2.80	1.81	1.81	000
11313		A	Shave skin lesion	1.62	2.15	1.90	0.71	0.72	0.10	3.87	3.62	2.43	2.44	000
11400		A	Exc tr-ext b9+marg 0.5 < cm	0.85	1.86	1.97	0.92	0.89	0.06	2.77	2.88	1.83	1.80	010
11401		A	Exc tr-ext b9+marg 0.6–1 cm	1.23	2.15	2.08	1.12	1.05	0.10	3.48	3.41	2.45	2.38	010
11402		A	Exc tr-ext b9+marg 1.1–2 cm	1.40	2.35	2.26	1.18	1.11	0.13	3.88	3.79	2.71	2.64	010
11403		A	Exc tr-ext b9+marg 2.1–3 cm	1.79	2.52	2.43	1.54	1.38	0.17	4.48	4.39	3.50	3.34	010
11404		A	Exc tr-ext b9+marg 3.1–4 cm	2.06	2.83	2.74	1.61	1.45	0.21	5.10	5.01	3.88	3.72	010
11406		A	Exc tr-ext b9+marg > 4.0 cm	3.45	3.37	3.15	1.94	1.72	0.32	7.14	6.92	5.71	5.49	010

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
11420		A	Exc h-f-nk-sp b9+marg 0.5 <	0.98	1.81	1.78	0.92	0.93	0.09	2.88	2.85	1.99	2.00	010
11421		A	Exc h-f-nk-sp b9+marg 0.6–1	1.42	2.18	2.10	1.14	1.12	0.13	3.73	3.65	2.69	2.67	010
11422		A	Exc h-f-nk-sp b9+marg 1.1–2	1.63	2.38	2.29	1.49	1.37	0.16	4.17	4.08	3.28	3.16	010
11423		A	Exc h-f-nk-sp b9+marg 2.1–3	2.01	2.62	2.60	1.62	1.49	0.20	4.83	4.81	3.83	3.70	010
11424		A	Exc h-f-nk-sp b9+marg 3.1–4	2.43	2.93	2.84	1.74	1.64	0.25	5.61	5.52	4.42	4.32	010
11426		A	Exc h-f-nk-sp b9+marg > 4 cm	4.02	3.55	3.51	2.14	2.12	0.44	8.01	7.97	6.60	6.58	010
11440		A	Exc face-mm b9+marg 0.5 < cm	1.00	1.98	2.15	1.29	1.31	0.08	3.06	3.23	2.37	2.39	010
11441		A	Exc face-mm b9+marg 0.6–1 cm	1.48	2.34	2.34	1.52	1.50	0.13	3.95	3.95	3.13	3.11	010
11442		A	Exc face-mm b9+marg 1.1–2 cm	1.72	2.58	2.56	1.61	1.58	0.16	4.46	4.44	3.49	3.46	010
11443		A	Exc face-mm b9+marg 2.1–3 cm	2.29	2.81	2.89	1.79	1.81	0.22	5.32	5.40	4.30	4.32	010
11444		A	Exc face-mm b9+marg 3.1–4 cm	3.14	3.21	3.41	2.03	2.15	0.30	6.65	6.85	5.47	5.59	010
11446		A	Exc face-mm b9+marg > 4 cm	4.73	3.86	4.00	2.47	2.70	0.43	9.02	9.16	7.63	7.86	010
11450		A	Removal, sweat gland lesion	3.10	5.15	5.07	2.41	2.13	0.34	8.59	8.51	5.85	5.57	090
11451		A	Removal, sweat gland lesion	4.31	6.14	6.50	2.77	2.61	0.53	10.98	11.34	7.61	7.45	090
11462		A	Removal, sweat gland lesion	2.88	5.31	5.17	2.45	2.13	0.32	8.51	8.37	5.65	5.33	090
11463		A	Removal, sweat gland lesion	4.31	6.58	6.78	2.94	2.75	0.54	11.43	11.63	7.79	7.60	090
11470		A	Removal, sweat gland lesion	3.62	5.57	5.20	2.67	2.37	0.40	9.59	9.22	6.69	6.39	090
11471		A	Removal, sweat gland lesion	4.77	6.42	6.65	2.95	2.82	0.58	11.77	12.00	8.30	8.17	090
11600		A	Exc tr-ext mlg+marg 0.5 < cm	1.56	2.61	2.63	1.01	0.98	0.10	4.27	4.29	2.67	2.64	010
11601		A	Exc tr-ext mlg+marg 0.6–1 cm	2.00	3.27	2.85	1.35	1.25	0.12	5.39	4.97	3.47	3.37	010
11602		A	Exc tr-ext mlg+marg 1.1–2 cm	2.20	3.65	3.04	1.52	1.33	0.12	5.97	5.36	3.84	3.65	010
11603		A	Exc tr-ext mlg+marg 2.1–3 cm	2.75	3.85	3.27	1.69	1.42	0.16	6.76	6.18	4.60	4.33	010
11604		A	Exc tr-ext mlg+marg 3.1–4 cm	3.10	4.15	3.57	1.76	1.48	0.20	7.45	6.87	5.06	4.78	010
11606		A	Exc tr-ext mlg+marg > 4 cm	4.95	5.28	4.37	2.27	1.87	0.36	10.59	9.68	7.58	7.18	010
11620		A	Exc h-f-nk-sp mlg+marg 0.5 <	1.57	2.70	2.63	1.05	0.98	0.09	4.36	4.29	2.71	2.64	010
11621		A	Exc h-f-nk-sp mlg+marg 0.6–1	2.01	3.32	2.86	1.38	1.28	0.12	5.45	4.99	3.51	3.41	010
11622		A	Exc h-f-nk-sp mlg+marg 1.1–2	2.34	3.70	3.15	1.57	1.44	0.14	6.18	5.63	4.05	3.92	010
11623		A	Exc h-f-nk-sp mlg+marg 2.1–3	3.04	3.92	3.49	1.78	1.63	0.20	7.16	6.73	5.02	4.87	010
11624		A	Exc h-f-nk-sp *mlg+marg 3.1–4	3.55	4.23	3.87	1.90	1.81	0.27	8.05	7.69	5.72	5.63	010
11626		A	Exc h-f-nk-sp mlg+mar > 4 cm	4.54	4.88	4.70	2.26	2.37	0.45	9.87	9.69	7.25	7.36	010
11640		A	Exc face-mm malig+marg 0.5 <	1.60	2.89	2.72	1.14	1.12	0.11	4.60	4.43	2.85	2.83	010
11641		A	Exc face-mm malig+marg 0.6–1	2.10	3.44	3.13	1.44	1.51	0.16	5.70	5.39	3.70	3.77	010
11642		A	Exc face-mm malig+marg 1.1–2	2.55	3.82	3.51	1.66	1.70	0.19	6.56	6.25	4.40	4.44	010
11643		A	Exc face-mm malig+marg 2.1–3	3.35	4.06	3.87	1.92	1.96	0.26	7.67	7.48	5.53	5.57	010
11644		A	Exc face-mm malig+marg 3.1–4	4.27	4.82	4.72	2.25	2.41	0.37	9.46	9.36	6.89	7.05	010
11646		A	Exc face-mm mlg+marg > 4 cm	6.19	5.73	5.76	3.01	3.36	0.61	12.53	12.56	9.81	10.16	010
11719		R	Trim nail(s)	0.17	0.38	0.28	0.04	0.06	0.02	0.57	0.47	0.23	0.25	000
11720		A	Debride nail, 1–5	0.32	0.47	0.37	0.08	0.11	0.04	0.83	0.73	0.44	0.47	000
11721		A	Debride nail, 6 or more	0.54	0.54	0.47	0.14	0.19	0.07	1.15	1.08	0.75	0.80	000
11730		A	Removal of nail plate	1.13	1.34	1.11	0.29	0.40	0.14	2.61	2.38	1.56	1.67	000
11732		A	Remove nail plate, add-on	0.57	0.54	0.47	0.14	0.20	0.07	1.18	1.11	0.78	0.84	ZZZ
11740		A	Drain blood from under nail	0.37	0.80	0.61	0.43	0.37	0.04	1.21	1.02	0.84	0.78	000
11750		A	Removal of nail bed	2.36	2.94	2.36	1.86	1.79	0.22	5.52	4.94	4.44	4.37	010
11752		A	Remove nail bed/finger tip	3.42	4.07	3.27	2.77	2.94	0.35	7.84	7.04	6.54	6.71	010
11755		A	Biopsy, nail unit	1.31	2.01	1.68	0.75	0.77	0.14	3.46	3.13	2.20	2.22	000
11760		A	Repair of nail bed	1.58	3.41	2.83	1.42	1.70	0.21	5.20	4.62	3.21	3.49	010
11762		A	Reconstruction of nail bed	2.89	3.67	3.09	1.66	2.18	0.36	6.92	6.34	4.91	5.43	010
11765		A	Excision of nail fold, toe	0.69	2.67	2.01	1.00	0.82	0.08	3.44	2.78	1.77	1.59	010
11770		A	Removal of pilonidal lesion	2.61	3.47	3.49	1.52	1.51	0.33	6.41	6.43	4.46	4.45	010
11771		A	Removal of pilonidal lesion	5.91	6.67	5.91	3.70	3.42	0.74	13.32	12.56	10.35	10.07	090
11772		A	Removal of pilonidal lesion	7.15	8.00	7.64	5.51	5.19	0.89	16.04	15.68	13.55	13.23	090
11900		A	Injection into skin lesions	0.52	0.90	0.71	0.24	0.22	0.02	1.44	1.25	0.78	0.76	000

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
11901		A	Added skin lesions injection	0.80	1.00	0.75	0.38	0.36	0.03	1.83	1.58	1.21	1.19	000
11920		R	Correct skin color defects	1.61	2.37	3.38	1.10	1.09	0.24	4.22	5.23	2.95	2.94	000
11921		R	Correct skin color defects	1.93	2.63	3.64	1.24	1.26	0.29	4.85	5.86	3.46	3.48	000
11922		R	Correct skin color defects	0.49	0.92	1.09	0.22	0.24	0.07	1.48	1.65	0.78	0.80	ZZZ
11950		R	Therapy for contour defects	0.84	0.86	1.07	0.35	0.38	0.06	1.76	1.97	1.25	1.28	000
11951		R	Therapy for contour defects	1.19	1.17	1.41	0.52	0.51	0.11	2.47	2.71	1.82	1.81	000
11952		R	Therapy for contour defects	1.69	1.69	1.82	0.79	0.71	0.16	3.54	3.67	2.64	2.56	000
11954		R	Therapy for contour defects	1.85	1.78	2.28	0.77	0.87	0.25	3.88	4.38	2.87	2.97	000
11960		A	Insert tissue expander(s)	10.85	NA	NA	10.40	10.42	1.31	NA	NA	22.56	22.58	090
11970		A	Replace tissue expander	7.80	NA	NA	5.94	6.10	1.05	NA	NA	14.79	14.95	090
11971		A	Remove tissue expander(s)	3.13	7.33	8.69	3.95	3.84	0.32	10.78	12.14	7.40	7.29	090
11975		N	Insert contraceptive cap	1.48	1.53	1.45	0.33	0.51	0.17	3.18	3.10	1.98	2.16	XXX
11976		R	Removal of contraceptive cap	1.78	1.68	1.71	0.45	0.62	0.21	3.67	3.70	2.44	2.61	000
11977		N	Removal/reinsert contra cap	3.30	1.96	2.20	0.74	1.13	0.37	5.63	5.87	4.41	4.80	XXX
11980		A	Implant hormone pellet(s)	1.48	1.17	1.10	0.55	0.54	0.13	2.78	2.71	2.16	2.15	000
11981		A	Insert drug implant device	1.48	1.96	1.77	0.61	0.66	0.12	3.56	3.37	2.21	2.26	XXX
11982		A	Remove drug implant device	1.78	2.09	1.99	0.73	0.81	0.17	4.04	3.94	2.68	2.76	XXX
11983		A	Remove/insert drug implant	3.30	2.74	2.40	1.38	1.45	0.23	6.27	5.93	4.91	4.98	XXX
12001		A	Repair superficial wound(s)	1.70	1.71	1.92	0.71	0.76	0.15	3.56	3.77	2.56	2.61	010
12002		A	Repair superficial wound(s)	1.86	1.77	1.98	0.82	0.88	0.17	3.80	4.01	2.85	2.91	010
12004		A	Repair superficial wound(s)	2.24	2.05	2.26	0.90	0.98	0.21	4.50	4.71	3.35	3.43	010
12005		A	Repair superficial wound(s)	2.86	2.50	2.75	1.05	1.16	0.27	5.63	5.88	4.18	4.29	010
12006		A	Repair superficial wound(s)	3.66	3.00	3.30	1.27	1.45	0.35	7.01	7.31	5.28	5.46	010
12007		A	Repair superficial wound(s)	4.11	3.37	3.72	1.46	1.73	0.45	7.93	8.28	6.02	6.29	010
12011		A	Repair superficial wound(s)	1.76	1.88	2.08	0.74	0.77	0.16	3.80	4.00	2.66	2.69	010
12013		A	Repair superficial wound(s)	1.99	2.03	2.22	0.87	0.92	0.18	4.20	4.39	3.04	3.09	010
12014		A	Repair superficial wound(s)	2.46	2.25	2.50	0.96	1.04	0.23	4.94	5.19	3.65	3.73	010
12015		A	Repair superficial wound(s)	3.19	2.73	3.04	1.09	1.21	0.29	6.21	6.52	4.57	4.69	010
12016		A	Repair superficial wound(s)	3.92	3.12	3.45	1.26	1.46	0.37	7.41	7.74	5.55	5.75	010
12017		A	Repair superficial wound(s)	4.70	NA	NA	1.45	1.79	0.47	NA	NA	6.62	6.96	010
12018		A	Repair superficial wound(s)	5.52	NA	NA	1.94	2.18	0.64	NA	NA	8.10	8.34	010
12020		A	Closure of split wound	2.62	3.73	3.81	1.76	1.89	0.30	6.65	6.73	4.68	4.81	010
12021		A	Closure of split wound	1.84	1.84	1.83	1.32	1.39	0.24	3.92	3.91	3.40	3.47	010
12031		A	Layer closure of wound(s)	2.15	3.84	2.68	1.74	1.16	0.17	6.16	5.00	4.06	3.48	010
12032		A	Layer closure of wound(s)	2.47	5.13	4.17	2.23	1.91	0.16	7.76	6.80	4.86	4.54	010
12034		A	Layer closure of wound(s)	2.92	4.52	3.53	1.94	1.57	0.25	7.69	6.70	5.11	4.74	010
12035		A	Layer closure of wound(s)	3.42	5.23	5.22	2.07	2.14	0.39	9.04	9.03	5.88	5.95	010
12036		A	Layer closure of wound(s)	4.04	5.35	5.52	2.20	2.46	0.55	9.94	10.11	6.79	7.05	010
12037		A	Layer closure of wound(s)	4.66	5.90	6.06	2.57	2.87	0.66	11.22	11.38	7.89	8.19	010
12041		A	Layer closure of wound(s)	2.37	3.78	2.86	1.72	1.28	0.19	6.34	5.42	4.28	3.84	010
12042		A	Layer closure of wound(s)	2.74	4.40	3.55	2.06	1.61	0.17	7.31	6.46	4.97	4.52	010
12044		A	Layer closure of wound(s)	3.14	5.27	3.73	1.88	1.67	0.27	8.68	7.14	5.29	5.08	010
12045		A	Layer closure of wound(s)	3.63	5.04	5.22	2.04	2.23	0.41	9.08	9.26	6.08	6.27	010
12046		A	Layer closure of wound(s)	4.24	5.60	6.29	2.24	2.63	0.54	10.38	11.07	7.02	7.41	010
12047		A	Layer closure of wound(s)	4.64	6.11	6.30	2.47	2.94	0.58	11.33	11.52	7.69	8.16	010
12051		A	Layer closure of wound(s)	2.47	4.03	3.47	1.87	1.56	0.20	6.70	6.14	4.54	4.23	010
12052		A	Layer closure of wound(s)	2.77	4.34	3.51	2.06	1.59	0.17	7.28	6.45	5.00	4.53	010
12053		A	Layer closure of wound(s)	3.12	5.26	3.75	2.06	1.66	0.23	8.61	7.10	5.41	5.01	010
12054		A	Layer closure of wound(s)	3.45	5.31	4.01	2.00	1.72	0.30	9.06	7.76	5.75	5.47	010
12055		A	Layer closure of wound(s)	4.42	5.98	4.86	2.08	2.12	0.45	10.85	9.73	6.95	6.99	010
12056		A	Layer closure of wound(s)	5.23	6.15	6.62	2.34	2.88	0.59	11.97	12.44	8.16	8.70	010
12057		A	Layer closure of wound(s)	5.95	7.34	6.45	2.74	3.51	0.56	13.85	12.96	9.25	10.02	010

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
13100		A	Repair of wound or lesion	3.12	4.34	4.13	2.40	2.33	0.26	7.72	7.51	5.78	5.71	010
13101		A	Repair of wound or lesion	3.91	5.85	4.97	2.91	2.75	0.26	10.02	9.14	7.08	6.92	010
13102		A	Repair wound/lesion add-on	1.24	1.33	1.21	0.52	0.56	0.13	2.70	2.58	1.89	1.93	ZZZ
13120		A	Repair of wound or lesion	3.30	4.48	4.23	2.51	2.39	0.26	8.04	7.79	6.07	5.95	010
13121		A	Repair of wound or lesion	4.32	6.13	5.18	3.10	2.88	0.25	10.70	9.75	7.67	7.45	010
13122		A	Repair wound/lesion add-on	1.44	1.36	1.47	0.57	0.62	0.15	2.95	3.06	2.16	2.21	ZZZ
13131		A	Repair of wound or lesion	3.78	4.90	4.50	2.80	2.72	0.26	8.94	8.54	6.84	6.76	010
13132		A	Repair of wound or lesion	6.44	7.73	6.37	4.83	4.34	0.32	14.49	13.13	11.59	11.10	010
13133		A	Repair wound/lesion add-on	2.19	1.82	1.70	0.94	1.01	0.18	4.19	4.07	3.31	3.38	ZZZ
13150		A	Repair of wound or lesion	3.80	4.60	4.81	2.63	2.74	0.34	8.74	8.95	6.77	6.88	010
13151		A	Repair of wound or lesion	4.44	5.39	4.96	3.13	3.15	0.31	10.14	9.71	7.88	7.90	010
13152		A	Repair of wound or lesion	6.32	7.38	6.38	3.80	3.99	0.40	14.10	13.10	10.52	10.71	010
13153		A	Repair wound/lesion add-on	2.38	1.96	1.95	0.97	1.10	0.24	4.58	4.57	3.59	3.72	ZZZ
13160		A	Late closure of wound	11.76	NA	NA	6.98	7.13	1.54	NA	NA	20.28	20.43	090
14000		A	Skin tissue rearrangement	6.75	8.78	8.10	5.91	5.59	0.59	16.12	15.44	13.25	12.93	090
14001		A	Skin tissue rearrangement	9.52	10.90	9.81	7.40	7.17	0.82	21.24	20.15	17.74	17.51	090
14020		A	Skin tissue rearrangement	7.58	9.80	8.92	6.70	6.59	0.64	18.02	17.14	14.92	14.81	090
14021		A	Skin tissue rearrangement	11.10	12.18	10.55	8.43	8.33	0.81	24.09	22.46	20.34	20.24	090
14040		A	Skin tissue rearrangement	8.36	10.23	9.18	7.06	7.18	0.62	19.21	18.16	16.04	16.16	090
14041		A	Skin tissue rearrangement	12.59	13.27	11.28	9.10	8.80	0.73	26.59	24.60	22.42	22.12	090
14060		A	Skin tissue rearrangement	8.99	9.94	9.09	7.47	7.46	0.68	19.61	18.76	17.14	17.13	090
14061		A	Skin tissue rearrangement	13.57	14.52	12.35	9.92	9.63	0.76	28.85	26.68	24.25	23.96	090
14300		A	Skin tissue rearrangement	13.16	13.25	11.68	9.22	9.21	1.16	27.57	26.00	23.54	23.53	090
14350		A	Skin tissue rearrangement	10.72	NA	NA	6.78	7.07	1.34	NA	NA	18.84	19.13	090
15000		A	Wound prep, 1st 100 sq cm	3.99	4.19	3.90	1.70	2.07	0.54	8.72	8.43	6.23	6.60	000
15001		A	Wound prep, addl 100 sq cm	1.00	0.55	1.15	0.34	0.39	0.14	1.69	2.29	1.48	1.53	ZZZ
15040		A	Harvest cultured skin graft	2.00	3.82	4.38	1.01	1.10	0.24	6.06	6.62	3.25	3.34	000
15050		A	Skin pinch graft	5.29	7.58	7.09	4.97	5.08	0.57	13.44	12.95	10.83	10.94	090
15100		A	Skin splt grft, trnk/arm/leg	9.66	10.25	12.03	7.16	7.67	1.28	21.19	22.97	18.10	18.61	090
15101		A	Skin splt grft t/a/l, add-on	1.72	2.48	3.43	0.85	1.09	0.24	4.44	5.39	2.81	3.05	ZZZ
15110		A	Epidrm autogrft trnk/arm/leg	10.82	8.81	10.23	6.40	6.87	1.31	20.94	22.36	18.53	19.00	090
15111		A	Epidrm autogrft t/a/l add-on	1.85	0.87	1.19	0.63	0.75	0.26	2.98	3.30	2.74	2.86	ZZZ
15115		A	Epidrm a-grft face/nck/hf/g	11.13	9.05	9.20	6.58	7.17	1.15	21.33	21.48	18.86	19.45	090
15116		A	Epidrm a-grft f/n/hf/g addl	2.50	1.20	1.49	0.86	1.06	0.33	4.03	4.32	3.69	3.89	ZZZ
15120		A	Skn splt a-grft fac/nck/hf/g	10.88	11.06	10.83	7.22	7.66	1.16	23.10	22.87	19.26	19.70	090
15121		A	Skn splt a-grft f/n/hf/g add	2.67	3.42	4.24	1.30	1.71	0.36	6.45	7.27	4.33	4.74	ZZZ
15130		A	Derm autograft, trnk/arm/leg	7.33	7.94	9.40	5.56	6.16	0.97	16.24	17.70	13.86	14.46	090
15131		A	Derm autograft t/a/l add-on	1.50	0.68	0.97	0.51	0.61	0.21	2.39	2.68	2.22	2.32	ZZZ
15135		A	Derm autograft face/nck/hf/g	10.83	9.30	9.75	6.89	7.84	1.23	21.36	21.81	18.95	19.90	090
15136		A	Derm autograft, f/n/hf/g add	1.50	0.66	0.83	0.52	0.63	0.20	2.36	2.53	2.22	2.33	ZZZ
15150		A	Cult epiderm grft t/arm/leg	9.24	7.12	8.14	5.83	6.30	1.14	17.50	18.52	16.21	16.68	090
15151		A	Cult epiderm grft t/a/l addl	2.00	0.88	1.20	0.68	0.81	0.28	3.16	3.48	2.96	3.09	ZZZ
15152		A	Cult epiderm graft t/a/l +%	2.50	1.05	1.43	0.85	1.01	0.35	3.90	4.28	3.70	3.86	ZZZ
15155		A	Cult epiderm graft, f/n/hf/g	9.99	7.51	7.76	6.17	6.78	1.05	18.55	18.80	17.21	17.82	090
15156		A	Cult epidrm grft f/n/hfg add	2.75	1.16	1.46	0.95	1.17	0.36	4.27	4.57	4.06	4.28	ZZZ
15157		A	Cult epiderm grft f/n/hfg +%	3.00	1.34	1.67	1.04	1.27	0.39	4.73	5.06	4.43	4.66	ZZZ
15170		A	Acell graft trunk/arms/legs	5.99	3.60	3.78	2.31	2.36	0.55	10.14	10.32	8.85	8.90	090
15171		A	Acell graft t/arm/leg add-on	1.55	0.63	0.67	0.50	0.59	0.19	2.37	2.41	2.24	2.33	ZZZ
15175		A	Acellular graft, f/n/hf/g	7.99	5.17	5.37	3.68	3.93	0.82	13.98	14.18	12.49	12.74	090
15176		A	Acell graft, f/n/hf/g add-on	2.45	1.05	1.10	0.79	0.94	0.29	3.79	3.84	3.53	3.68	ZZZ
15200		A	Skin full graft, trunk	8.89	9.76	9.51	6.22	6.22	0.98	19.63	19.38	16.09	16.09	090
15201		A	Skin full graft trunk add-on	1.32	2.08	2.45	0.55	0.60	0.19	3.59	3.96	2.06	2.11	ZZZ

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
15220		A	Skin full graft sclp/arm/leg	7.86	10.19	9.46	6.48	6.65	0.84	18.89	18.16	15.18	15.35	090
15221		A	Skin full graft add-on	1.19	1.99	2.25	0.49	0.54	0.16	3.34	3.60	1.84	1.89	ZZZ
15240		A	Skin full grft face/genit/hf	10.03	11.05	10.44	7.96	7.97	0.92	22.00	21.39	18.91	18.92	090
15241		A	Skin full graft add-on	1.86	2.48	2.46	0.78	0.88	0.23	4.57	4.55	2.87	2.97	ZZZ
15260		A	Skin full graft een & lips	11.29	12.67	10.85	9.05	8.71	0.69	24.65	22.83	21.03	20.69	090
15261		A	Skin full graft add-on	2.23	2.89	2.75	1.11	1.33	0.21	5.33	5.19	3.55	3.77	ZZZ
15300		A	Apply skinallogrft, t/arm/lg	4.65	3.31	3.24	2.06	2.20	0.49	8.45	8.38	7.20	7.34	090
15301		A	Apply sknallogrft t/a/l addl	1.00	0.47	0.47	0.33	0.38	0.14	1.61	1.61	1.47	1.52	ZZZ
15320		A	Apply skin allogrft f/n/hf/g	5.36	3.69	3.65	2.27	2.47	0.58	9.63	9.59	8.21	8.41	090
15321		A	Aply sknallogrft f/n/hfg add	1.50	0.67	0.69	0.49	0.57	0.21	2.38	2.40	2.20	2.28	ZZZ
15330		A	Aply acell alogrft t/arm/leg	3.99	3.10	3.18	1.86	2.14	0.49	7.58	7.66	6.34	6.62	090
15331		A	Aply acell grft t/a/l add-on	1.00	0.45	0.46	0.33	0.38	0.14	1.59	1.60	1.47	1.52	ZZZ
15335		A	Apply acell graft, f/n/hf/g	4.50	3.35	3.45	2.02	2.34	0.55	8.40	8.50	7.07	7.39	090
15336		A	Aply acell grft f/n/hf/g add	1.43	0.70	0.69	0.47	0.55	0.20	2.33	2.32	2.10	2.18	ZZZ
15340		A	Apply cult skin substitute	3.72	3.74	3.94	2.68	2.74	0.41	7.87	8.07	6.81	6.87	010
15341		A	Apply cult skin sub add-on	0.50	0.72	0.64	0.16	0.19	0.06	1.28	1.20	0.72	0.75	ZZZ
15360		A	Apply cult derm sub, t/a/l	3.87	4.26	4.43	3.07	3.09	0.43	8.56	8.73	7.37	7.39	090
15361		A	Aply cult derm sub t/a/l add	1.15	0.56	0.58	0.37	0.44	0.14	1.85	1.87	1.66	1.73	ZZZ
15365		A	Apply cult derm sub f/n/hf/g	4.15	4.30	4.50	3.14	3.19	0.46	8.91	9.11	7.75	7.80	090
15366		A	Apply cult derm f/hf/g add	1.45	0.67	0.69	0.47	0.55	0.17	2.29	2.31	2.09	2.17	ZZZ
15400		A	Apply skin xenograft, t/a/l	4.32	4.87	4.23	3.66	3.93	0.47	9.66	9.02	8.45	8.72	090
15401		A	Apply skn xenogrft t/a/l add	1.00	1.01	1.68	0.33	0.41	0.14	2.15	2.82	1.47	1.55	ZZZ
15420		A	Apply skin xgraft, f/n/hf/g	4.83	5.01	4.85	3.82	3.81	0.52	10.36	10.20	9.17	9.16	090
15421		A	Apply skn xgrft f/n/hf/g add	1.50	1.18	1.29	0.50	0.59	0.21	2.89	3.00	2.21	2.30	ZZZ
15430		A	Apply acellular xenograft	5.75	6.95	6.93	6.37	6.57	0.66	13.36	13.34	12.78	12.98	090
15570		A	Form skin pedicle flap	9.94	10.21	11.05	6.35	6.67	1.34	21.49	22.33	17.63	17.95	090
15572		A	Form skin pedicle flap	9.88	9.61	9.54	6.51	6.48	1.20	20.69	20.62	17.59	17.56	090
15574		A	Form skin pedicle flap	10.48	10.26	10.60	6.81	7.56	1.20	21.94	22.28	18.49	19.24	090
15576		A	Form skin pedicle flap	9.18	9.42	9.69	6.32	6.76	0.87	19.47	19.74	16.37	16.81	090
15600		A	Skin graft	1.91	5.21	7.02	2.67	2.97	0.27	7.39	9.20	4.85	5.15	090
15610		A	Skin graft	2.42	5.49	4.90	2.99	3.32	0.35	8.26	7.67	5.76	6.09	090
15620		A	Skin graft	3.56	6.26	7.42	3.74	3.85	0.35	10.17	11.33	7.65	7.76	090
15630		A	Skin graft	3.89	6.86	7.01	4.16	4.16	0.34	11.09	11.24	8.39	8.39	090
15650		A	Transfer skin pedicle flap	4.58	7.00	7.12	4.19	4.21	0.42	12.00	12.12	9.19	9.21	090
15732		A	Muscle-skin graft, head/neck	19.62	14.42	17.17	10.88	11.91	1.99	36.03	38.78	32.49	33.52	090
15734		A	Muscle-skin graft, trunk	19.52	14.95	17.36	11.12	12.09	2.61	37.08	39.49	33.25	34.22	090
15736		A	Muscle-skin graft, arm	16.86	13.54	17.10	9.75	10.88	2.45	32.85	36.41	29.06	30.19	090
15738		A	Muscle-skin graft, leg	18.86	13.82	16.97	10.22	11.37	2.65	35.33	38.48	31.73	32.88	090
15740		A	Island pedicle flap graft	11.47	13.20	10.92	9.13	8.49	0.63	25.30	23.02	21.23	20.59	090
15750		A	Neurovascular pedicle graft	12.63	NA	NA	8.53	8.94	1.42	NA	NA	22.58	22.99	090
15756		A	Free myo/skin flap microvasc	36.64	NA	NA	17.98	19.96	4.61	NA	NA	59.23	61.21	090
15757		A	Free skin flap, microvasc	36.85	NA	NA	16.45	20.35	3.89	NA	NA	57.19	61.09	090
15758		A	Free fascial flap, microvasc	36.60	NA	NA	16.06	20.24	4.23	NA	NA	56.89	61.07	090
15760		A	Composite skin graft	9.60	10.03	10.05	6.74	7.15	0.85	20.48	20.50	17.19	17.60	090
15770		A	Derma-fat-fascia graft	8.63	NA	NA	6.43	6.63	1.05	NA	NA	16.11	16.31	090
15775		R	Hair transplant punch grafts	3.95	3.51	4.06	1.70	1.40	0.52	7.98	8.53	6.17	5.87	000
15776		R	Hair transplant punch grafts	5.53	3.91	5.01	1.56	2.50	0.72	10.16	11.26	7.81	8.75	000
15780		A	Abrasion treatment of skin	8.40	11.63	11.57	6.71	7.88	0.67	20.70	20.64	15.78	16.95	090
15781		A	Abrasion treatment of skin	4.84	8.47	7.32	5.49	5.41	0.34	13.65	12.50	10.67	10.59	090
15782		A	Abrasion treatment of skin	4.31	9.52	9.79	5.47	6.30	0.34	14.17	14.44	10.12	10.95	090
15783		A	Abrasion treatment of skin	4.28	7.95	7.16	4.97	4.39	0.28	12.51	11.72	9.53	8.95	090
15786		A	Abrasion, lesion, single	2.03	3.77	3.46	1.22	1.30	0.11	5.91	5.60	3.36	3.44	010

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
15787		A	Abrasion, lesions, add-on	0.33	0.82	1.02	0.10	0.15	0.04	1.19	1.39	0.47	0.52	ZZZ
15788		R	Chemical peel, face, epiderm	2.09	8.47	7.17	3.67	3.24	0.11	10.67	9.37	5.87	5.44	090
15789		R	Chemical peel, face, dermal	4.91	9.11	8.36	5.63	5.02	0.20	14.22	13.47	10.74	10.13	090
15792		R	Chemical peel, nonfacial	1.86	6.78	7.03	3.43	4.20	0.13	8.77	9.02	5.42	6.19	090
15793		A	Chemical peel, nonfacial	3.73	5.47	6.09	3.22	4.10	0.19	9.39	10.01	7.14	8.02	090
15819		A	Plastic surgery, neck	10.37	NA	NA	6.54	7.04	0.97	NA	NA	17.88	18.38	090
15820		A	Revision of lower eyelid	6.01	6.09	6.77	4.94	5.42	0.40	12.50	13.18	11.35	11.83	090
15821		A	Revision of lower eyelid	6.58	6.32	7.11	5.08	5.57	0.45	13.35	14.14	12.11	12.60	090
15822		A	Revision of upper eyelid	4.44	4.97	5.63	3.88	4.35	0.37	9.78	10.44	8.69	9.16	090
15823		A	Revision of upper eyelid	8.04	7.14	7.69	5.91	6.32	0.50	15.68	16.23	14.45	14.86	090
15831		A	Excise excessive skin tissue	13.56	NA	NA	8.57	8.28	1.75	NA	NA	23.88	23.59	090
15832		A	Excise excessive skin tissue	12.57	NA	NA	8.11	8.30	1.66	NA	NA	22.34	22.53	090
15833		A	Excise excessive skin tissue	11.62	NA	NA	7.11	7.95	1.49	NA	NA	20.22	21.06	090
15834		A	Excise excessive skin tissue	11.89	NA	NA	7.63	7.69	1.61	NA	NA	21.13	21.19	090
15835		A	Excise excessive skin tissue	12.71	NA	NA	7.67	7.59	1.60	NA	NA	21.98	21.90	090
15836		A	Excise excessive skin tissue	10.33	NA	NA	6.78	6.80	1.34	NA	NA	18.45	18.47	090
15837		A	Excise excessive skin tissue	9.29	8.63	8.59	5.65	6.96	1.18	19.10	19.06	16.12	17.43	090
15838		A	Excise excessive skin tissue	7.99	NA	NA	4.79	5.76	0.58	NA	NA	13.36	14.33	090
15839		A	Excise excessive skin tissue	10.24	9.21	8.94	6.05	6.32	1.22	20.67	20.40	17.51	17.78	090
15840		A	Graft for face nerve palsy	14.66	NA	NA	8.37	9.59	1.32	NA	NA	24.35	25.57	090
15841		A	Graft for face nerve palsy	25.57	NA	NA	12.70	14.45	2.54	NA	NA	40.81	42.56	090
15842		A	Flap for face nerve palsy	40.54	NA	NA	20.48	22.36	4.93	NA	NA	65.95	67.83	090
15845		A	Skin and muscle repair, face	13.92	NA	NA	8.43	9.11	0.81	NA	NA	23.16	23.84	090
15850		B	Removal of sutures	0.78	1.20	1.47	0.18	0.27	0.05	2.03	2.30	1.01	1.10	XXX
15851		A	Removal of sutures	0.86	1.32	1.59	0.23	0.29	0.06	2.24	2.51	1.15	1.21	000
15852		A	Dressing change not for burn	0.86	1.61	1.79	0.25	0.31	0.09	2.56	2.74	1.20	1.26	000
15860		A	Test for blood flow in graft	1.95	0.68	0.79	0.68	0.76	0.27	2.90	3.01	2.90	2.98	000
15920		A	Removal of tail bone ulcer	8.06	NA	NA	5.74	5.61	1.04	NA	NA	14.84	14.71	090
15922		A	Removal of tail bone ulcer	10.13	NA	NA	6.89	7.15	1.42	NA	NA	18.44	18.70	090
15931		A	Remove sacrum pressure sore	9.89	NA	NA	5.50	5.65	1.25	NA	NA	16.64	16.79	090
15933		A	Remove sacrum pressure sore	11.49	NA	NA	7.27	7.72	1.52	NA	NA	20.28	20.73	090
15934		A	Remove sacrum pressure sore	13.45	NA	NA	7.50	7.92	1.78	NA	NA	22.73	23.15	090
15935		A	Remove sacrum pressure sore	15.45	NA	NA	9.93	10.25	2.09	NA	NA	27.47	27.79	090
15936		A	Remove sacrum pressure sore	12.96	NA	NA	7.38	8.03	1.76	NA	NA	22.10	22.75	090
15937		A	Remove sacrum pressure sore	14.91	NA	NA	8.81	9.59	2.06	NA	NA	25.78	26.56	090
15940		A	Remove hip pressure sore	10.05	NA	NA	5.76	6.08	1.31	NA	NA	17.12	17.44	090
15941		A	Remove hip pressure sore	12.13	NA	NA	8.37	9.20	1.66	NA	NA	22.16	22.99	090
15944		A	Remove hip pressure sore	12.16	NA	NA	8.10	8.49	1.65	NA	NA	21.91	22.30	090
15945		A	Remove hip pressure sore	13.45	NA	NA	8.99	9.50	1.84	NA	NA	24.28	24.79	090
15946		A	Remove hip pressure sore	23.72	NA	NA	13.66	14.22	3.16	NA	NA	40.54	41.10	090
15950		A	Remove thigh pressure sore	7.83	NA	NA	5.33	5.41	1.04	NA	NA	14.20	14.28	090
15951		A	Remove thigh pressure sore	11.30	NA	NA	7.84	7.87	1.49	NA	NA	20.63	20.66	090
15952		A	Remove thigh pressure sore	12.03	NA	NA	7.66	7.74	1.60	NA	NA	21.29	21.37	090
15953		A	Remove thigh pressure sore	13.27	NA	NA	8.91	8.99	1.79	NA	NA	23.97	24.05	090
15956		A	Remove thigh pressure sore	16.46	NA	NA	9.51	10.48	2.21	NA	NA	28.18	29.15	090
15958		A	Remove thigh pressure sore	16.42	NA	NA	10.13	10.84	2.25	NA	NA	28.80	29.51	090
16000		A	Initial treatment of burn(s)	0.89	0.72	0.83	0.23	0.25	0.08	1.69	1.80	1.20	1.22	000
16020		A	Dress/debrid p-thick burn, s	0.80	1.10	1.24	0.55	0.57	0.08	1.98	2.12	1.43	1.45	000
16025		A	Dress/debrid p-thick burn, m	1.85	1.59	1.73	0.87	0.94	0.19	3.63	3.77	2.91	2.98	000
16030		A	Dress/debrid p-thick burn, l	2.08	1.95	2.12	0.94	1.08	0.24	4.27	4.44	3.26	3.40	000
16035		A	Incision of burn scab, initi	3.74	NA	NA	1.23	1.49	0.46	NA	NA	5.43	5.69	090
16036		A	Escharotomy; addll incision	1.50	NA	NA	0.47	0.57	0.20	NA	NA	2.17	2.27	ZZZ

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
17000		A	Destroy benign/premlg lesion	0.60	1.38	1.07	0.72	0.59	0.03	2.01	1.70	1.35	1.22	010
17003		A	Destroy lesions, 2–14	0.07	0.10	0.11	0.03	0.06	0.01	0.18	0.19	0.11	0.14	ZZZ
17004		A	Destroy lesions, 15 or more	1.58	1.94	2.22	1.32	1.52	0.11	3.63	3.91	3.01	3.21	010
17106		A	Destruction of skin lesions	4.58	4.58	4.60	3.19	3.30	0.35	9.51	9.53	8.12	8.23	090
17107		A	Destruction of skin lesions	9.15	7.14	7.20	5.05	5.37	0.63	16.92	16.98	14.83	15.15	090
17108		A	Destruction of skin lesions	13.18	9.25	9.28	6.69	7.43	0.54	22.97	23.00	20.41	21.15	090
17110		A	Destruct lesion, 1–14	0.65	1.74	1.65	0.85	0.74	0.05	2.44	2.35	1.55	1.44	010
17111		A	Destruct lesion, 15 or more	0.92	2.25	1.82	1.10	0.88	0.05	3.22	2.79	2.07	1.85	010
17250		A	Chemical cautery, tissue	0.50	1.31	1.24	0.38	0.35	0.06	1.87	1.80	0.94	0.91	000
17260		A	Destruction of skin lesions	0.91	1.39	1.31	0.69	0.68	0.04	2.34	2.26	1.64	1.63	010
17261		A	Destruction of skin lesions	1.17	2.45	1.82	1.04	0.88	0.05	3.67	3.04	2.26	2.10	010
17262		A	Destruction of skin lesions	1.58	2.79	2.12	1.24	1.08	0.06	4.43	3.76	2.88	2.72	010
17263		A	Destruction of skin lesions	1.79	3.01	2.30	1.33	1.15	0.07	4.87	4.16	3.19	3.01	010
17264		A	Destruction of skin lesions	1.94	3.22	2.48	1.40	1.19	0.08	5.24	4.50	3.42	3.21	010
17266		A	Destruction of skin lesions	2.34	3.47	2.75	1.56	1.31	0.09	5.90	5.18	3.99	3.74	010
17270		A	Destruction of skin lesions	1.32	2.40	1.88	1.07	0.92	0.05	3.77	3.25	2.44	2.29	010
17271		A	Destruction of skin lesions	1.49	2.62	1.99	1.19	1.03	0.06	4.17	3.54	2.74	2.58	010
17272		A	Destruction of skin lesions	1.77	2.92	2.23	1.33	1.17	0.07	4.76	4.07	3.17	3.01	010
17273		A	Destruction of skin lesions	2.05	3.16	2.45	1.46	1.27	0.08	5.29	4.58	3.59	3.40	010
17274		A	Destruction of skin lesions	2.59	3.56	2.82	1.71	1.51	0.10	6.25	5.51	4.40	4.20	010
17276		A	Destruction of skin lesions	3.20	3.83	3.17	1.94	1.75	0.16	7.19	6.53	5.30	5.11	010
17280		A	Destruction of skin lesions	1.17	2.32	1.79	1.01	0.86	0.05	3.54	3.01	2.23	2.08	010
17281		A	Destruction of skin lesions	1.72	2.69	2.11	1.30	1.14	0.07	4.48	3.90	3.09	2.93	010
17282		A	Destruction of skin lesions	2.04	3.09	2.39	1.46	1.30	0.08	5.21	4.51	3.58	3.42	010
17283		A	Destruction of skin lesions	2.64	3.50	2.79	1.73	1.55	0.11	6.25	5.54	4.48	4.30	010
17284		A	Destruction of skin lesions	3.21	3.92	3.18	1.99	1.82	0.13	7.26	6.52	5.33	5.16	010
17286		A	Destruction of skin lesions	4.43	4.31	3.84	2.40	2.44	0.23	8.97	8.50	7.06	7.10	010
17304		A	1 stage mohs, up to 5 spec	7.59	11.81	9.15	3.65	3.59	0.30	19.70	17.04	11.54	11.48	000
17305		A	2 stage mohs, up to 5 spec	2.85	6.85	4.64	1.37	1.35	0.11	9.81	7.60	4.33	4.31	000
17306		A	3 stage mohs, up to 5 spec	2.85	7.09	4.71	1.36	1.35	0.11	10.05	7.67	4.32	4.31	000
17307		A	Mohs addl stage up to 5 spec	2.85	6.84	4.39	1.37	1.36	0.11	9.80	7.35	4.33	4.32	000
17310		A	Mohs any stage > 5 spec each	0.95	1.97	1.71	0.46	0.46	0.03	2.95	2.69	1.44	1.44	ZZZ
17340		A	Cryotherapy of skin	0.76	0.32	0.36	0.36	0.36	0.05	1.13	1.17	1.17	1.17	010
17360		A	Skin peel therapy	1.43	1.40	1.43	0.97	0.90	0.06	2.89	2.92	2.46	2.39	010
19000		A	Drainage of breast lesion	0.84	1.96	1.98	0.26	0.30	0.08	2.88	2.90	1.18	1.22	000
19001		A	Drain breast lesion add-on	0.42	0.26	0.25	0.13	0.14	0.04	0.72	0.71	0.59	0.60	ZZZ
19020		A	Incision of breast lesion	3.68	6.64	6.42	3.02	2.77	0.45	10.77	10.55	7.15	6.90	090
19030		A	Injection for breast x-ray	1.53	2.76	2.84	0.53	0.51	0.09	4.38	4.46	2.15	2.13	000
19100		A	Bx breast percut w/o image	1.27	2.09	2.09	0.33	0.40	0.16	3.52	3.52	1.76	1.83	000
19101		A	Biopsy of breast, open	3.18	4.34	4.47	1.76	1.88	0.39	7.91	8.04	5.33	5.45	010
19102		A	Bx breast percut w/image	2.00	3.58	3.78	0.66	0.66	0.14	5.72	5.92	2.80	2.80	000
19103		A	Bx breast percut w/device	3.69	10.42	11.25	1.17	1.22	0.30	14.41	15.24	5.16	5.21	000
19110		A	Nipple exploration	4.29	6.41	5.96	3.25	2.97	0.57	11.27	10.82	8.11	7.83	090
19112		A	Excise breast duct fistula	3.66	6.26	6.13	3.14	2.80	0.48	10.40	10.27	7.28	6.94	090
19120		A	Removal of breast lesion	5.80	5.08	4.68	3.35	3.14	0.73	11.61	11.21	9.88	9.67	090
19125		A	Excision, breast lesion	6.55	5.55	4.98	3.64	3.38	0.80	12.90	12.33	10.99	10.73	090
19126		A	Excision, addl breast lesion	2.93	NA	NA	0.74	0.94	0.38	NA	NA	4.05	4.25	ZZZ
19140		A	Removal of breast tissue	5.13	8.01	7.37	3.81	3.50	0.69	13.83	13.19	9.63	9.32	090
19160		A	Partial mastectomy	5.98	NA	NA	3.60	3.47	0.79	NA	NA	10.37	10.24	090
19162		A	P-mastectomy w/ln removal	13.81	NA	NA	6.08	6.28	1.79	NA	NA	21.68	21.88	090
19180		A	Removal of breast	15.61	NA	NA	7.01	5.53	1.18	NA	NA	23.80	22.32	090
19182		A	Removal of breast	7.72	NA	NA	4.97	4.81	1.04	NA	NA	13.73	13.57	090
19200		A	Removal of breast	17.13	NA	NA	8.11	8.01	1.92	NA	NA	27.16	27.06	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
19220		A	Removal of breast	17.73	NA	NA	8.58	8.33	2.07	NA	NA	28.38	28.13	090
19240		A	Removal of breast	17.83	NA	NA	8.74	8.35	2.12	NA	NA	28.69	28.30	090
19260		A	Removal of chest wall lesion	17.52	NA	NA	10.28	10.96	2.13	NA	NA	29.93	30.61	090
19271		A	Revision of chest wall	21.72	NA	NA	16.08	17.52	2.62	NA	NA	40.42	41.86	090
19272		A	Extensive chest wall surgery	24.68	NA	NA	17.30	18.56	2.99	NA	NA	44.97	46.23	090
19290		A	Place needle wire, breast	1.27	3.00	2.90	0.44	0.43	0.07	4.34	4.24	1.78	1.77	000
19291		A	Place needle wire, breast	0.63	1.18	1.20	0.22	0.21	0.04	1.85	1.87	0.89	0.88	ZZZ
19295		A	Place breast clip, percut	0.00	2.38	2.62	NA	NA	0.01	2.39	2.63	NA	NA	ZZZ
19296		A	Place po breast cath for rad	3.63	85.16	115.6	1.19	1.45	0.36	89.15	119.6	5.18	5.44	000
19297		A	Place breast cath for rad	1.72	NA	NA	0.46	0.60	0.17	NA	NA	2.35	2.49	ZZZ
19298		A	Place breast rad tube/caths	6.00	23.02	37.47	1.94	2.30	0.43	29.45	43.90	8.37	8.73	000
19316		A	Suspension of breast	10.92	NA	NA	6.94	7.38	1.64	NA	NA	19.50	19.94	090
19318		A	Reduction of large breast	15.85	NA	NA	9.75	10.84	2.92	NA	NA	28.52	29.61	090
19324		A	Enlarge breast	6.59	NA	NA	4.56	4.82	0.84	NA	NA	11.99	12.25	090
19325		A	Enlarge breast with implant	8.44	NA	NA	6.33	6.49	1.33	NA	NA	16.10	16.26	090
19328		A	Removal of breast implant	6.29	NA	NA	4.94	5.01	0.91	NA	NA	12.14	12.21	090
19330		A	Removal of implant material	8.33	NA	NA	5.96	6.03	1.26	NA	NA	15.55	15.62	090
19340		A	Immediate breast prosthesis	6.32	NA	NA	2.78	3.04	1.06	NA	NA	10.16	10.42	ZZZ
19342		A	Delayed breast prosthesis	12.30	NA	NA	8.68	8.88	1.83	NA	NA	22.81	23.01	090
19350		A	Breast reconstruction	8.91	9.75	12.85	6.46	7.01	1.41	20.07	23.17	16.78	17.33	090
19355		A	Correct inverted nipple(s)	8.31	7.67	9.63	4.84	4.74	0.92	16.90	18.86	14.07	13.97	090
19357		A	Breast reconstruction	20.33	NA	NA	15.17	15.54	2.93	NA	NA	38.43	38.80	090
19361		A	Breast reconstruction	20.63	NA	NA	12.06	12.37	2.92	NA	NA	35.61	35.92	090
19364		A	Breast reconstruction	42.30	NA	NA	22.32	23.29	6.22	NA	NA	70.84	71.81	090
19366		A	Breast reconstruction	21.62	NA	NA	9.92	11.19	3.24	NA	NA	34.78	36.05	090
19367		A	Breast reconstruction	26.51	NA	NA	14.97	16.30	4.03	NA	NA	45.51	46.84	090
19368		A	Breast reconstruction	33.51	NA	NA	17.75	18.67	5.52	NA	NA	56.78	57.70	090
19369		A	Breast reconstruction	30.92	NA	NA	15.55	17.73	4.50	NA	NA	50.97	53.15	090
19370		A	Surgery of breast capsule	8.91	NA	NA	6.71	6.87	1.29	NA	NA	16.91	17.07	090
19371		A	Removal of breast capsule	10.34	NA	NA	7.57	7.77	1.62	NA	NA	19.53	19.73	090
19380		A	Revise breast reconstruction	10.13	NA	NA	7.50	7.67	1.44	NA	NA	19.07	19.24	090
19396		A	Design custom breast implant	2.17	4.46	1.93	1.21	1.05	0.30	6.93	4.40	3.68	3.52	000
20000		A	Incision of abscess	2.12	2.77	2.72	1.51	1.68	0.25	5.14	5.09	3.88	4.05	010
20005		A	Incision of deep abscess	3.53	3.70	3.55	2.02	2.20	0.46	7.69	7.54	6.01	6.19	010
20100		A	Explore wound, neck	10.31	NA	NA	3.56	4.24	1.21	NA	NA	15.08	15.76	010
20101		A	Explore wound, chest	3.22	6.46	6.07	1.50	1.59	0.44	10.12	9.73	5.16	5.25	010
20102		A	Explore wound, abdomen	3.93	6.95	7.35	1.83	1.89	0.49	11.37	11.77	6.25	6.31	010
20103		A	Explore wound, extremity	5.29	7.63	8.36	2.68	3.22	0.75	13.67	14.40	8.72	9.26	010
20150		A	Excise epiphyseal bar	14.54	NA	NA	7.57	7.18	2.03	NA	NA	24.14	23.75	090
20200		A	Muscle biopsy	1.46	3.16	3.07	0.70	0.74	0.23	4.85	4.76	2.39	2.43	000
20205		A	Deep muscle biopsy	2.35	3.83	3.88	1.09	1.17	0.33	6.51	6.56	3.77	3.85	000
20206		A	Needle biopsy, muscle	0.99	5.45	6.25	0.57	0.62	0.07	6.51	7.31	1.63	1.68	000
20220		A	Bone biopsy, trocar/needle	1.27	2.81	4.13	0.68	0.76	0.08	4.16	5.48	2.03	2.11	000
20225		A	Bone biopsy, trocar/needle	1.87	13.50	21.77	1.07	1.12	0.22	15.59	23.86	3.16	3.21	000
20240		A	Bone biopsy, excisional	3.23	NA	NA	2.06	2.44	0.44	NA	NA	5.73	6.11	010
20245		A	Bone biopsy, excisional	8.71	NA	NA	5.70	6.37	1.31	NA	NA	15.72	16.39	010
20250		A	Open bone biopsy	5.14	NA	NA	3.67	3.55	1.02	NA	NA	9.83	9.71	010
20251		A	Open bone biopsy	5.67	NA	NA	3.84	4.09	1.15	NA	NA	10.66	10.91	010
20500		A	Injection of sinus tract	1.23	1.33	2.04	0.87	1.37	0.12	2.68	3.39	2.22	2.72	010
20501		A	Inject sinus tract for x-ray	0.76	2.47	2.81	0.27	0.26	0.04	3.27	3.61	1.07	1.06	000
20520		A	Removal of foreign body	1.85	2.57	2.83	1.42	1.68	0.21	4.63	4.89	3.48	3.74	010
20525		A	Removal of foreign body	3.49	7.02	8.63	2.16	2.51	0.51	11.02	12.63	6.16	6.51	010
20526		A	Ther injection, carp tunnel	0.94	0.80	0.93	0.40	0.49	0.13	1.87	2.00	1.47	1.56	000

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CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
20550		A	Inj tendon sheath/ligament	0.75	0.62	0.69	0.28	0.24	0.09	1.46	1.53	1.12	1.08	000
20551		A	Inj tendon origin/insertion	0.75	0.63	0.67	0.28	0.32	0.08	1.46	1.50	1.11	1.15	000
20552		A	Inj trigger point, 1/2 muscl	0.66	0.58	0.69	0.24	0.21	0.05	1.29	1.40	0.95	0.92	000
20553		A	Inject trigger points, =/> 3	0.75	0.64	0.78	0.26	0.23	0.04	1.43	1.57	1.05	1.02	000
20600		A	Drain/inject, joint/bursa	0.66	0.66	0.65	0.31	0.34	0.08	1.40	1.39	1.05	1.08	000
20605		A	Drain/inject, joint/bursa	0.68	0.73	0.75	0.32	0.35	0.08	1.49	1.51	1.08	1.11	000
20610		A	Drain/inject, joint/bursa	0.79	1.06	0.98	0.39	0.41	0.11	1.96	1.88	1.29	1.31	000
20612		A	Aspirate/inj ganglion cyst	0.70	0.69	0.71	0.31	0.35	0.10	1.49	1.51	1.11	1.15	000
20615		A	Treatment of bone cyst	2.28	2.69	3.31	1.39	1.74	0.20	5.17	5.79	3.87	4.22	010
20650		A	Insert and remove bone pin	2.23	2.47	2.40	1.45	1.53	0.31	5.01	4.94	3.99	4.07	010
20660		A	Apply, rem fixation device	2.51	3.33	3.13	1.46	1.57	0.59	6.43	6.23	4.56	4.67	000
20661		A	Application of head brace	5.06	NA	NA	5.87	5.16	1.14	NA	NA	12.07	11.36	090
20662		A	Application of pelvis brace	6.18	NA	NA	4.96	5.40	0.56	NA	NA	11.70	12.14	090
20663		A	Application of thigh brace	5.54	NA	NA	5.04	4.89	0.94	NA	NA	11.52	11.37	090
20664		A	Halo brace application	9.78	NA	NA	7.92	7.28	1.74	NA	NA	19.44	18.80	090
20665		A	Removal of fixation device	1.31	1.40	1.97	0.98	1.26	0.19	2.90	3.47	2.48	2.76	010
20670		A	Removal of support implant	1.74	6.63	10.34	1.66	2.00	0.28	8.65	12.36	3.68	4.02	010
20680		A	Removal of support implant	5.86	8.09	8.63	4.02	3.80	0.56	14.51	15.05	10.44	10.22	090
20690		A	Apply bone fixation device	3.63	NA	NA	2.22	2.45	0.59	NA	NA	6.44	6.67	090
20692		A	Apply bone fixation device	6.40	NA	NA	3.20	3.64	1.05	NA	NA	10.65	11.09	090
20693		A	Adjust bone fixation device	5.91	NA	NA	4.45	5.21	0.98	NA	NA	11.34	12.10	090
20694		A	Remove bone fixation device	4.15	5.29	6.69	3.50	3.91	0.71	10.15	11.55	8.36	8.77	090
20802		A	Replantation, arm, complete	42.16	NA	NA	12.96	19.00	3.81	NA	NA	58.93	64.97	090
20805		A	Replant forearm, complete	51.00	NA	NA	23.26	31.62	4.84	NA	NA	79.10	87.46	090
20808		A	Replantation hand, complete	62.63	NA	NA	37.95	41.24	6.86	NA	NA	107.4	110.7	090
20816		A	Replantation digit, complete	31.64	NA	NA	24.04	34.44	4.52	NA	NA	60.20	70.60	090
20822		A	Replantation digit, complete	26.30	NA	NA	21.95	31.51	4.18	NA	NA	52.43	61.99	090
20824		A	Replantation thumb, complete	31.64	NA	NA	25.31	33.82	4.61	NA	NA	61.56	70.07	090
20827		A	Replantation thumb, complete	27.12	NA	NA	23.48	33.31	3.66	NA	NA	54.26	64.09	090
20838		A	Replantation foot, complete	42.42	NA	NA	13.13	20.04	1.12	NA	NA	56.67	63.58	090
20900		A	Removal of bone for graft	5.69	9.21	8.64	4.87	5.49	0.94	15.84	15.27	11.50	12.12	090
20902		A	Removal of bone for graft	7.90	NA	NA	5.74	6.61	1.30	NA	NA	14.94	15.81	090
20910		A	Remove cartilage for graft	5.33	NA	NA	4.54	5.04	0.71	NA	NA	10.58	11.08	090
20912		A	Remove cartilage for graft	6.34	NA	NA	4.58	5.50	0.69	NA	NA	11.61	12.53	090
20920		A	Removal of fascia for graft	5.36	NA	NA	4.33	4.26	0.66	NA	NA	10.35	10.28	090
20922		A	Removal of fascia for graft	6.78	7.54	7.56	4.97	4.90	0.70	15.02	15.04	12.45	12.38	090
20924		A	Removal of tendon for graft	6.53	NA	NA	4.91	5.65	1.04	NA	NA	12.48	13.22	090
20926		A	Removal of tissue for graft	5.64	NA	NA	4.33	4.65	0.87	NA	NA	10.84	11.16	090
20931		A	Spinal bone allograft	1.81	NA	NA	0.67	0.87	0.43	NA	NA	2.91	3.11	ZZZ
20937		A	Spinal bone autograft	2.79	NA	NA	1.06	1.35	0.54	NA	NA	4.39	4.68	ZZZ
20938		A	Spinal bone autograft	3.02	NA	NA	1.13	1.45	0.64	NA	NA	4.79	5.11	ZZZ
20950		A	Fluid pressure, muscle	1.26	4.14	6.18	0.87	0.96	0.20	5.60	7.64	2.33	2.42	000
20955		A	Fibula bone graft, microvasc	39.90	NA	NA	17.66	22.67	4.89	NA	NA	62.45	67.46	090
20956		A	Iliac bone graft, microvasc	40.79	NA	NA	20.30	23.68	7.01	NA	NA	68.10	71.48	090
20957		A	Mt bone graft, microvasc	42.17	NA	NA	18.97	18.99	7.05	NA	NA	68.19	68.21	090
20962		A	Other bone graft, microvasc	39.21	NA	NA	20.73	25.13	6.55	NA	NA	66.49	70.89	090
20969		A	Bone/skin graft, microvasc	44.99	NA	NA	19.75	24.97	4.79	NA	NA	69.53	74.75	090
20970		A	Bone/skin graft, iliac crest	44.14	NA	NA	19.85	24.05	6.60	NA	NA	70.59	74.79	090
20972		A	Bone/skin graft, metatarsal	44.07	NA	NA	17.15	19.77	5.30	NA	NA	66.52	69.14	090
20973		A	Bone/skin graft, great toe	46.83	NA	NA	14.61	22.58	5.54	NA	NA	66.98	74.95	090
20974		A	Electrical bone stimulation	0.62	1.00	0.77	0.49	0.53	0.11	1.73	1.50	1.22	1.26	000
20975		A	Electrical bone stimulation	2.60	NA	NA	1.45	1.65	0.51	NA	NA	4.56	4.76	000
20979		A	Us bone stimulation	0.62	0.61	0.75	0.20	0.31	0.09	1.32	1.46	0.91	1.02	000

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
20982		A	Ablate, bone tumor(s) perq	7.27	86.78	104.1	2.87	2.95	0.69	94.74	112.1	10.83	10.91	000
21010		A	Incision of jaw joint	10.82	NA	NA	6.35	6.92	1.11	NA	NA	18.28	18.85	090
21015		A	Resection of facial tumor	5.53	NA	NA	4.34	4.85	0.70	NA	NA	10.57	11.08	090
21025		A	Excision of bone, lower jaw	10.99	12.43	12.32	8.65	9.20	1.32	24.74	24.63	20.96	21.51	090
21026		A	Excision of facial bone(s)	5.46	8.65	8.07	5.79	6.20	0.60	14.71	14.13	11.85	12.26	090
21029		A	Contour of face bone lesion	8.20	9.15	9.34	6.18	6.82	0.94	18.29	18.48	15.32	15.96	090
21030		A	Excise max/zygoma b9 tumor	4.74	7.18	6.56	4.67	4.95	0.54	12.46	11.84	9.95	10.23	090
21031		A	Remove exostosis, mandible	3.24	5.99	5.38	3.51	3.60	0.48	9.71	9.10	7.23	7.32	090
21032		A	Remove exostosis, maxilla	3.24	6.08	5.54	3.38	3.49	0.47	9.79	9.25	7.09	7.20	090
21034		A	Excise max/zygoma mlg tumor	17.09	12.98	15.22	9.35	11.86	1.71	31.78	34.02	28.15	30.66	090
21040		A	Excise mandible lesion	4.74	7.26	6.62	4.67	4.72	0.54	12.54	11.90	9.95	10.00	090
21044		A	Removal of jaw bone lesion	12.53	NA	NA	7.38	8.90	1.12	NA	NA	21.03	22.55	090
21045		A	Extensive jaw surgery	18.03	NA	NA	9.84	11.75	1.52	NA	NA	29.39	31.30	090
21046		A	Remove mandible cyst complex	13.85	NA	NA	11.39	11.80	1.85	NA	NA	27.09	27.50	090
21047		A	Excise lwr jaw cyst w/repair	19.71	NA	NA	9.62	12.52	2.12	NA	NA	31.45	34.35	090
21048		A	Remove maxilla cyst complex	14.35	NA	NA	11.34	11.96	1.76	NA	NA	27.45	28.07	090
21049		A	Excis uppr jaw cyst w/repair	18.96	NA	NA	8.93	12.03	1.59	NA	NA	29.48	32.58	090
21050		A	Removal of jaw joint	11.44	NA	NA	8.10	9.13	1.47	NA	NA	21.01	22.04	090
21060		A	Remove jaw joint cartilage	10.83	NA	NA	7.48	8.34	1.38	NA	NA	19.69	20.55	090
21070		A	Remove coronoid process	8.44	NA	NA	6.09	6.86	1.27	NA	NA	15.80	16.57	090
21076		A	Prepare face/oral prosthesis	13.40	7.88	11.26	4.81	8.73	1.99	23.27	26.65	20.20	24.12	010
21077		A	Prepare face/oral prosthesis	33.70	18.22	28.12	12.26	22.63	4.55	56.47	66.37	50.51	60.88	090
21079		A	Prepare face/oral prosthesis	22.31	13.41	19.52	8.32	14.98	3.15	38.87	44.98	33.78	40.44	090
21080		A	Prepare face/oral prosthesis	25.06	15.49	22.29	9.25	16.88	3.74	44.29	51.09	38.05	45.68	090
21081		A	Prepare face/oral prosthesis	22.85	14.23	20.33	8.51	15.28	3.20	40.28	46.38	34.56	41.33	090
21082		A	Prepare face/oral prosthesis	20.84	14.20	18.10	8.46	13.95	3.11	38.15	42.05	32.41	37.90	090
21083		A	Prepare face/oral prosthesis	19.27	14.14	17.67	7.96	12.84	2.88	36.29	39.82	30.11	34.99	090
21084		A	Prepare face/oral prosthesis	22.48	15.59	20.77	8.82	15.52	2.18	40.25	45.43	33.48	40.18	090
21085		A	Prepare face/oral prosthesis	8.99	6.56	7.87	3.58	6.00	1.27	16.82	18.13	13.84	16.26	010
21086		A	Prepare face/oral prosthesis	24.88	12.72	21.04	8.70	16.79	3.71	41.31	49.63	37.29	45.38	090
21087		A	Prepare face/oral prosthesis	24.88	12.92	20.74	8.87	16.66	3.44	41.24	49.06	37.19	44.98	090
21100		A	Maxillofacial fixation	4.46	13.92	12.15	5.13	4.85	0.34	18.72	16.95	9.93	9.65	090
21110		A	Interdental fixation	5.70	13.34	10.53	9.95	8.77	0.72	19.76	16.95	16.37	15.19	090
21116		A	Injection, jaw joint x-ray	0.81	2.47	3.87	0.22	0.30	0.06	3.34	4.74	1.09	1.17	000
21120		A	Reconstruction of chin	4.92	10.08	10.48	6.95	7.37	0.60	15.60	16.00	12.47	12.89	090
21121		A	Reconstruction of chin	7.63	10.47	9.94	7.41	7.73	0.90	19.00	18.47	15.94	16.26	090
21122		A	Reconstruction of chin	8.51	NA	NA	7.54	8.37	1.07	NA	NA	17.12	17.95	090
21123		A	Reconstruction of chin	11.14	NA	NA	10.14	10.66	1.40	NA	NA	22.68	23.20	090
21125		A	Augmentation, lower jaw bone	10.60	68.82	58.74	7.01	8.01	0.79	80.21	70.13	18.40	19.40	090
21127		A	Augmentation, lower jaw bone	12.16	87.70	54.12	7.88	9.08	1.52	101.4	67.80	21.56	22.76	090
21137		A	Reduction of forehead	10.06	NA	NA	6.18	7.36	1.32	NA	NA	17.56	18.74	090
21138		A	Reduction of forehead	12.67	NA	NA	8.46	9.29	1.74	NA	NA	22.87	23.70	090
21139		A	Reduction of forehead	14.84	NA	NA	6.89	10.04	1.18	NA	NA	22.91	26.06	090
21141		A	Reconstruct midface, lefort	19.13	NA	NA	11.24	13.08	2.35	NA	NA	32.72	34.56	090
21142		A	Reconstruct midface, lefort	19.84	NA	NA	10.35	12.23	2.38	NA	NA	32.57	34.45	090
21143		A	Reconstruct midface, lefort	20.61	NA	NA	8.69	12.94	1.66	NA	NA	30.96	35.21	090
21145		A	Reconstruct midface, lefort	23.52	NA	NA	12.44	13.57	2.84	NA	NA	38.80	39.93	090
21146		A	Reconstruct midface, lefort	24.41	NA	NA	9.15	13.82	3.09	NA	NA	36.65	41.32	090
21147		A	Reconstruct midface, lefort	26.01	NA	NA	13.44	14.68	1.84	NA	NA	41.29	42.53	090
21150		A	Reconstruct midface, lefort	25.70	NA	NA	13.48	15.98	2.55	NA	NA	41.73	44.23	090
21151		A	Reconstruct midface, lefort	28.76	NA	NA	11.43	20.12	2.30	NA	NA	42.49	51.18	090
21154		A	Reconstruct midface, lefort	30.95	NA	NA	20.76	22.58	2.48	NA	NA	54.19	56.01	090
21155		A	Reconstruct midface, lefort	34.88	NA	NA	13.09	21.24	6.64	NA	NA	54.61	62.76	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
21159		A	Reconstruct midface, lefort	42.80	NA	NA	14.87	25.59	8.18	NA	NA	65.85	76.57	090
21160		A	Reconstruct midface, lefort	46.85	NA	NA	23.14	26.45	4.13	NA	NA	74.12	77.43	090
21172		A	Reconstruct orbit/forehead	28.01	NA	NA	12.81	13.55	3.55	NA	NA	44.37	45.11	090
21175		A	Reconstruct orbit/forehead	33.37	NA	NA	12.26	16.45	4.83	NA	NA	50.46	54.65	090
21179		A	Reconstruct entire forehead	22.47	NA	NA	10.75	13.32	2.80	NA	NA	36.02	38.59	090
21180		A	Reconstruct entire forehead	25.40	NA	NA	12.14	14.60	3.48	NA	NA	41.02	43.48	090
21181		A	Contour cranial bone lesion	10.14	NA	NA	6.63	7.27	1.32	NA	NA	18.09	18.73	090
21182		A	Reconstruct cranial bone	32.39	NA	NA	13.71	17.81	2.80	NA	NA	48.90	53.00	090
21183		A	Reconstruct cranial bone	35.51	NA	NA	15.01	19.42	4.47	NA	NA	54.99	59.40	090
21184		A	Reconstruct cranial bone	38.43	NA	NA	20.38	21.60	5.70	NA	NA	64.51	65.73	090
21188		A	Reconstruction of midface	22.91	NA	NA	14.49	17.81	1.69	NA	NA	39.09	42.41	090
21193		A	Reconst lwr jaw w/o graft	18.55	NA	NA	9.96	12.01	2.23	NA	NA	30.74	32.79	090
21194		A	Reconst lwr jaw w/graft	21.42	NA	NA	11.23	13.15	2.02	NA	NA	34.67	36.59	090
21195		A	Reconst lwr jaw w/o fixation	18.76	NA	NA	13.08	14.42	1.64	NA	NA	33.48	34.82	090
21196		A	Reconst lwr jaw w/fixation	20.43	NA	NA	13.01	15.06	2.07	NA	NA	35.51	37.56	090
21198		A	Reconstr lwr jaw segment	15.38	NA	NA	10.89	12.28	1.44	NA	NA	27.71	29.10	090
21199		A	Reconstr lwr jaw w/advance	16.56	NA	NA	6.65	8.52	1.39	NA	NA	24.60	26.47	090
21206		A	Reconstruct upper jaw bone	15.26	NA	NA	11.18	12.30	1.33	NA	NA	27.77	28.89	090
21208		A	Augmentation of facial bones	11.03	32.29	24.87	7.65	9.12	1.09	44.41	36.99	19.77	21.24	090
21209		A	Reduction of facial bones	7.46	12.20	11.17	7.33	7.90	0.90	20.56	19.53	15.69	16.26	090
21210		A	Face bone graft	11.28	44.00	29.71	7.72	8.97	1.30	56.58	42.29	20.30	21.55	090
21215		A	Lower jaw bone graft	11.82	86.93	53.23	8.01	9.05	1.53	100.3	66.58	21.36	22.40	090
21230		A	Rib cartilage graft	11.00	NA	NA	6.67	7.71	1.29	NA	NA	18.96	20.00	090
21235		A	Ear cartilage graft	7.21	9.63	9.81	5.83	6.28	0.61	17.45	17.63	13.65	14.10	090
21240		A	Reconstruction of jaw joint	15.65	NA	NA	10.97	11.80	2.24	NA	NA	28.86	29.69	090
21242		A	Reconstruction of jaw joint	14.20	NA	NA	10.36	11.25	1.78	NA	NA	26.34	27.23	090
21243		A	Reconstruction of jaw joint	23.83	NA	NA	15.37	16.95	3.25	NA	NA	42.45	44.03	090
21244		A	Reconstruction of lower jaw	13.23	NA	NA	10.80	11.80	1.25	NA	NA	25.28	26.28	090
21245		A	Reconstruction of jaw	12.78	13.18	14.13	7.85	9.37	1.19	27.15	28.10	21.82	23.34	090
21246		A	Reconstruction of jaw	12.70	NA	NA	6.58	8.45	1.35	NA	NA	20.63	22.50	090
21247		A	Reconstruct lower jaw bone	23.91	NA	NA	13.25	16.36	2.83	NA	NA	39.99	43.10	090
21248		A	Reconstruction of jaw	12.46	12.63	12.29	7.52	8.95	1.55	26.64	26.30	21.53	22.96	090
21249		A	Reconstruction of jaw	18.49	16.05	16.59	9.87	12.02	2.48	37.02	37.56	30.84	32.99	090
21255		A	Reconstruct lower jaw bone	18.00	NA	NA	13.24	15.45	2.38	NA	NA	33.62	35.83	090
21256		A	Reconstruction of orbit	17.32	NA	NA	9.67	11.31	1.50	NA	NA	28.49	30.13	090
21260		A	Revise eye sockets	17.66	NA	NA	9.32	11.93	0.97	NA	NA	27.95	30.56	090
21261		A	Revise eye sockets	33.66	NA	NA	14.53	21.86	3.42	NA	NA	51.61	58.94	090
21263		A	Revise eye sockets	30.60	NA	NA	13.85	17.81	2.62	NA	NA	47.07	51.03	090
21267		A	Revise eye sockets	20.35	NA	NA	15.78	18.82	1.70	NA	NA	37.83	40.87	090
21268		A	Revise eye sockets	26.66	NA	NA	15.47	19.07	3.65	NA	NA	45.78	49.38	090
21270		A	Augmentation, cheek bone	10.46	10.98	11.51	5.74	6.89	0.72	22.16	22.69	16.92	18.07	090
21275		A	Revision, orbitofacial bones	11.59	NA	NA	7.17	7.93	1.29	NA	NA	20.05	20.81	090
21280		A	Revision of eyelid	6.84	NA	NA	5.64	5.87	0.42	NA	NA	12.90	13.13	090
21282		A	Revision of eyelid	4.05	NA	NA	4.10	4.39	0.26	NA	NA	8.41	8.70	090
21295		A	Revision of jaw muscle/bone	1.78	NA	NA	2.58	2.55	0.16	NA	NA	4.52	4.49	090
21296		A	Revision of jaw muscle/bone	4.61	NA	NA	5.45	5.05	0.34	NA	NA	10.40	10.00	090
21300		A	Treatment of skull fracture	0.72	0.27	1.85	0.27	0.26	0.13	1.12	2.70	1.12	1.11	000
21310		A	Treatment of nose fracture	0.58	1.95	2.21	0.10	0.14	0.05	2.58	2.84	0.73	0.77	000
21315		A	Treatment of nose fracture	1.76	4.41	4.28	1.63	1.83	0.14	6.31	6.18	3.53	3.73	010
21320		A	Treatment of nose fracture	1.85	4.00	3.94	1.23	1.52	0.18	6.03	5.97	3.26	3.55	010
21325		A	Treatment of nose fracture	4.01	NA	NA	6.67	8.15	0.31	NA	NA	10.99	12.47	090
21330		A	Treatment of nose fracture	5.62	NA	NA	7.31	9.13	0.56	NA	NA	13.49	15.31	090
21335		A	Treatment of nose fracture	8.85	NA	NA	7.62	9.14	0.74	NA	NA	17.21	18.73	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
21336		A	Treat nasal septal fracture	6.46	NA	NA	8.03	9.24	0.55	NA	NA	15.04	16.25	090
21337		A	Treat nasal septal fracture	3.20	5.80	6.06	3.32	3.52	0.28	9.28	9.54	6.80	7.00	090
21338		A	Treat nasoethmoid fracture	6.70	NA	NA	9.58	12.94	0.82	NA	NA	17.10	20.46	090
21339		A	Treat nasoethmoid fracture	8.33	NA	NA	10.51	13.08	0.96	NA	NA	19.80	22.37	090
21340		A	Treatment of nose fracture	11.25	NA	NA	7.17	8.11	1.15	NA	NA	19.57	20.51	090
21343		A	Treatment of sinus fracture	14.01	NA	NA	12.29	14.71	1.47	NA	NA	27.77	30.19	090
21344		A	Treatment of sinus fracture	21.26	NA	NA	12.89	15.64	2.43	NA	NA	36.58	39.33	090
21345		A	Treat nose/jaw fracture	8.77	9.60	9.80	5.91	6.87	0.92	19.29	19.49	15.60	16.56	090
21346		A	Treat nose/jaw fracture	11.21	NA	NA	10.60	11.83	1.21	NA	NA	23.02	24.25	090
21347		A	Treat nose/jaw fracture	13.29	NA	NA	11.39	15.03	1.47	NA	NA	26.15	29.79	090
21348		A	Treat nose/jaw fracture	17.28	NA	NA	6.74	10.04	2.48	NA	NA	26.50	29.80	090
21355		A	Treat cheek bone fracture	4.26	5.55	6.08	2.96	3.36	0.34	10.15	10.68	7.56	7.96	010
21356		A	Treat cheek bone fracture	4.64	6.70	7.03	3.86	4.39	0.46	11.80	12.13	8.96	9.49	010
21360		A	Treat cheek bone fracture	6.95	NA	NA	5.17	5.76	0.74	NA	NA	12.86	13.45	090
21365		A	Treat cheek bone fracture	16.42	NA	NA	8.73	10.33	1.69	NA	NA	26.84	28.44	090
21366		A	Treat cheek bone fracture	18.36	NA	NA	10.04	11.03	2.49	NA	NA	30.89	31.88	090
21385		A	Treat eye socket fracture	9.40	NA	NA	6.77	7.92	0.97	NA	NA	17.14	18.29	090
21386		A	Treat eye socket fracture	9.40	NA	NA	5.62	6.72	0.97	NA	NA	15.99	17.09	090
21387		A	Treat eye socket fracture	9.94	NA	NA	7.14	8.52	1.08	NA	NA	18.16	19.54	090
21390		A	Treat eye socket fracture	11.01	NA	NA	6.64	7.53	0.90	NA	NA	18.55	19.44	090
21395		A	Treat eye socket fracture	14.58	NA	NA	7.77	8.73	1.44	NA	NA	23.79	24.75	090
21400		A	Treat eye socket fracture	1.40	2.68	2.64	1.94	1.90	0.15	4.23	4.19	3.49	3.45	090
21401		A	Treat eye socket fracture	3.51	7.07	7.78	3.02	3.38	0.38	10.96	11.67	6.91	7.27	090
21406		A	Treat eye socket fracture	7.25	NA	NA	4.91	5.80	0.73	NA	NA	12.89	13.78	090
21407		A	Treat eye socket fracture	8.85	NA	NA	5.68	6.58	0.94	NA	NA	15.47	16.37	090
21408		A	Treat eye socket fracture	12.61	NA	NA	7.66	8.60	1.44	NA	NA	21.71	22.65	090
21421		A	Treat mouth roof fracture	5.70	12.01	10.02	8.89	8.47	0.73	18.44	16.45	15.32	14.90	090
21422		A	Treat mouth roof fracture	8.56	NA	NA	6.72	7.76	0.99	NA	NA	16.27	17.31	090
21423		A	Treat mouth roof fracture	10.63	NA	NA	7.16	8.80	1.27	NA	NA	19.06	20.70	090
21431		A	Treat craniofacial fracture	7.66	NA	NA	9.33	9.50	0.70	NA	NA	17.69	17.86	090
21432		A	Treat craniofacial fracture	8.72	NA	NA	7.15	7.85	0.81	NA	NA	16.68	17.38	090
21433		A	Treat craniofacial fracture	26.05	NA	NA	12.22	15.39	2.78	NA	NA	41.05	44.22	090
21435		A	Treat craniofacial fracture	19.92	NA	NA	10.63	12.21	1.98	NA	NA	32.53	34.11	090
21436		A	Treat craniofacial fracture	29.89	NA	NA	14.95	17.44	3.09	NA	NA	47.93	50.42	090
21440		A	Treat dental ridge fracture	3.20	10.28	7.91	7.61	6.54	0.38	13.86	11.49	11.19	10.12	090
21445		A	Treat dental ridge fracture	5.94	12.42	10.44	8.55	8.43	0.78	19.14	17.16	15.27	15.15	090
21450		A	Treat lower jaw fracture	3.47	10.39	8.15	7.63	7.08	0.33	14.19	11.95	11.43	10.88	090
21451		A	Treat lower jaw fracture	5.36	12.91	10.26	9.62	8.72	0.63	18.90	16.25	15.61	14.71	090
21452		A	Treat lower jaw fracture	2.23	11.76	12.74	5.88	4.94	0.27	14.26	15.24	8.38	7.44	090
21453		A	Treat lower jaw fracture	6.28	14.68	11.75	11.54	10.96	0.74	21.70	18.77	18.56	17.98	090
21454		A	Treat lower jaw fracture	7.07	NA	NA	5.57	6.10	0.82	NA	NA	13.46	13.99	090
21461		A	Treat lower jaw fracture	8.95	41.00	28.65	12.50	12.65	0.98	50.93	38.58	22.43	22.58	090
21462		A	Treat lower jaw fracture	10.65	42.32	31.35	13.10	12.84	1.27	54.24	43.27	25.02	24.76	090
21465		A	Treat lower jaw fracture	12.76	NA	NA	8.12	9.41	1.50	NA	NA	22.38	23.67	090
21470		A	Treat lower jaw fracture	17.12	NA	NA	9.90	11.51	1.96	NA	NA	28.98	30.59	090
21480		A	Reset dislocated jaw	0.61	1.50	1.71	0.17	0.19	0.06	2.17	2.38	0.84	0.86	000
21485		A	Reset dislocated jaw	4.48	12.24	9.24	9.21	8.06	0.51	17.23	14.23	14.20	13.05	090
21490		A	Repair dislocated jaw	12.59	NA	NA	7.75	9.23	1.96	NA	NA	22.30	23.78	090
21495		A	Treat hyoid bone fracture	6.43	NA	NA	9.46	8.70	0.46	NA	NA	16.35	15.59	090
21497		A	Interdental wiring	4.35	11.91	9.33	9.09	8.02	0.50	16.76	14.18	13.94	12.87	090
21501		A	Drain neck/chest lesion	3.80	6.39	6.43	3.41	3.73	0.43	10.62	10.66	7.64	7.96	090
21502		A	Drain chest lesion	7.35	NA	NA	4.75	5.43	0.97	NA	NA	13.07	13.75	090
21510		A	Drainage of bone lesion	5.97	NA	NA	4.68	5.43	0.80	NA	NA	11.45	12.20	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
21550		A	Biopsy of neck/chest	2.06	4.36	3.78	1.76	1.73	0.16	6.58	6.00	3.98	3.95	010
21555		A	Remove lesion, neck/chest	4.34	5.72	5.58	3.37	3.24	0.56	10.62	10.48	8.27	8.14	090
21556		A	Remove lesion, neck/chest	5.56	NA	NA	3.87	4.05	0.65	NA	NA	10.08	10.26	090
21557		A	Remove tumor, neck/chest	8.87	NA	NA	4.35	5.12	1.08	NA	NA	14.30	15.07	090
21600		A	Partial removal of rib	7.06	NA	NA	5.72	5.74	0.99	NA	NA	13.77	13.79	090
21610		A	Partial removal of rib	15.70	NA	NA	8.03	8.68	3.07	NA	NA	26.80	27.45	090
21615		A	Removal of rib	10.22	NA	NA	5.52	6.41	1.45	NA	NA	17.19	18.08	090
21616		A	Removal of rib and nerves	12.44	NA	NA	7.22	7.84	1.86	NA	NA	21.52	22.14	090
21620		A	Partial removal of sternum	7.08	NA	NA	4.86	5.71	0.98	NA	NA	12.92	13.77	090
21627		A	Sternal debridement	7.10	NA	NA	5.63	6.15	1.02	NA	NA	13.75	14.27	090
21630		A	Extensive sternum surgery	18.89	NA	NA	10.40	11.50	2.58	NA	NA	31.87	32.97	090
21632		A	Extensive sternum surgery	19.40	NA	NA	9.70	10.78	2.65	NA	NA	31.75	32.83	090
21685		A	Hyoid myotomy & suspension	14.77	NA	NA	7.68	9.42	1.06	NA	NA	23.51	25.25	090
21700		A	Revision of neck muscle	6.18	NA	NA	3.98	4.33	0.32	NA	NA	10.48	10.83	090
21705		A	Revision of neck muscle/rib	9.77	NA	NA	4.86	5.42	1.43	NA	NA	16.06	16.62	090
21720		A	Revision of neck muscle	5.67	1.94	2.34	4.29	2.93	0.91	8.52	8.92	10.87	9.51	090
21725		A	Revision of neck muscle	7.04	NA	NA	4.52	5.23	1.21	NA	NA	12.77	13.48	090
21740		A	Reconstruction of sternum	17.43	NA	NA	8.70	8.58	2.36	NA	NA	28.49	28.37	090
21750		A	Repair of sternum separation	11.33	NA	NA	5.50	5.97	1.63	NA	NA	18.46	18.93	090
21800		A	Treatment of rib fracture	0.96	NA	NA	1.40	1.36	0.09	NA	NA	2.45	2.41	090
21805		A	Treatment of rib fracture	2.75	NA	NA	3.51	3.29	0.38	NA	NA	6.64	6.42	090
21810		A	Treatment of rib fracture(s)	6.85	NA	NA	5.28	5.06	0.94	NA	NA	13.07	12.85	090
21820		A	Treat sternum fracture	1.28	1.78	1.82	1.84	1.79	0.16	3.22	3.26	3.28	3.23	090
21825		A	Treat sternum fracture	7.58	NA	NA	5.46	6.17	1.11	NA	NA	14.15	14.86	090
21920		A	Biopsy soft tissue of back	2.06	4.36	3.56	1.83	1.56	0.14	6.56	5.76	4.03	3.76	010
21925		A	Biopsy soft tissue of back	4.48	5.47	5.25	3.43	3.30	0.60	10.55	10.33	8.51	8.38	090
21930		A	Remove lesion, back or flank	4.99	6.01	5.80	3.74	3.49	0.66	11.66	11.45	9.39	9.14	090
21935		A	Remove tumor, back	18.29	NA	NA	8.40	9.34	2.47	NA	NA	29.16	30.10	090
22010		A	I&d, p-spine, c/t/cerv-thor	12.49	NA	NA	8.06	8.70	1.73	NA	NA	22.28	22.92	090
22015		A	I&d, p-spine, l/s/ls	12.38	NA	NA	8.02	8.64	1.71	NA	NA	22.11	22.73	090
22100		A	Remove part of neck vertebra	10.72	NA	NA	7.85	7.63	2.13	NA	NA	20.70	20.48	090
22101		A	Remove part, thorax vertebra	10.80	NA	NA	7.79	7.78	1.90	NA	NA	20.49	20.48	090
22102		A	Remove part, lumbar vertebra	10.80	NA	NA	7.08	7.87	1.87	NA	NA	19.75	20.54	090
22103		A	Remove extra spine segment	2.34	NA	NA	0.86	1.12	0.44	NA	NA	3.64	3.90	ZZZ
22110		A	Remove part of neck vertebra	13.72	NA	NA	8.88	9.11	2.76	NA	NA	25.36	25.59	090
22112		A	Remove part, thorax vertebra	13.79	NA	NA	8.76	9.17	2.52	NA	NA	25.07	25.48	090
22114		A	Remove part, lumbar vertebra	13.79	NA	NA	8.84	9.17	2.63	NA	NA	25.26	25.59	090
22116		A	Remove extra spine segment	2.32	NA	NA	0.84	1.09	0.50	NA	NA	3.66	3.91	ZZZ
22210		A	Revision of neck spine	25.03	NA	NA	14.35	15.18	5.44	NA	NA	44.82	45.65	090
22212		A	Revision of thorax spine	20.64	NA	NA	12.20	13.03	3.90	NA	NA	36.74	37.57	090
22214		A	Revision of lumbar spine	20.67	NA	NA	12.30	13.46	3.91	NA	NA	36.88	38.04	090
22216		A	Revise, extra spine segment	6.03	NA	NA	2.30	2.93	1.29	NA	NA	9.62	10.25	ZZZ
22220		A	Revision of neck spine	22.59	NA	NA	13.09	13.52	5.06	NA	NA	40.74	41.17	090
22222		A	Revision of thorax spine	22.74	NA	NA	12.03	11.38	4.12	NA	NA	38.89	38.24	090
22224		A	Revision of lumbar spine	22.74	NA	NA	12.88	13.92	4.18	NA	NA	39.80	40.84	090
22226		A	Revise, extra spine segment	6.03	NA	NA	2.08	2.85	1.29	NA	NA	9.40	10.17	ZZZ
22305		A	Treat spine process fracture	2.05	2.12	2.27	1.77	1.89	0.39	4.56	4.71	4.21	4.33	090
22310		A	Treat spine fracture	3.61	2.94	2.84	2.45	2.38	0.50	7.05	6.95	6.56	6.49	090
22315		A	Treat spine fracture	9.83	9.62	9.69	7.24	7.32	1.85	21.30	21.37	18.92	19.00	090
22318		A	Treat odontoid fx w/o graft	22.46	NA	NA	12.88	13.29	5.28	NA	NA	40.62	41.03	090
22319		A	Treat odontoid fx w/graft	25.07	NA	NA	13.69	14.49	6.03	NA	NA	44.79	45.59	090
22325		A	Treat spine fracture	19.52	NA	NA	11.67	12.00	3.87	NA	NA	35.06	35.39	090
22326		A	Treat neck spine fracture	20.56	NA	NA	11.71	12.48	4.42	NA	NA	36.69	37.46	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
22327		A	Treat thorax spine fracture	20.42	NA	NA	11.94	12.29	3.98	NA	NA	36.34	36.69	090
22328		A	Treat each add spine fx	4.60	NA	NA	1.75	2.14	0.94	NA	NA	7.29	7.68	ZZZ
22505		A	Manipulation of spine	1.87	NA	NA	1.04	0.97	0.36	NA	NA	3.27	3.20	010
22520		A	Percut vertebroplasty thor	9.15	46.33	57.96	4.66	5.00	1.71	57.19	68.82	15.52	15.86	010
22521		A	Percut vertebroplasty lumb	8.58	47.63	54.01	4.46	4.84	1.60	57.81	64.19	14.64	15.02	010
22522		A	Percut vertebroplasty addll	4.30	NA	NA	1.51	1.64	0.82	NA	NA	6.63	6.76	ZZZ
22523		A	Percut kyphoplasty, thor	9.19	NA	NA	4.74	5.63	1.71	NA	NA	15.64	16.53	010
22524		A	Percut kyphoplasty, lumbar	8.79	NA	NA	4.59	5.43	1.60	NA	NA	14.98	15.82	010
22525		A	Percut kyphoplasty, add-on	4.47	NA	NA	1.67	2.13	0.82	NA	NA	6.96	7.42	ZZZ
22532		A	Lat thorax spine fusion	25.73	NA	NA	13.40	14.50	4.34	NA	NA	43.47	44.57	090
22533		A	Lat lumbar spine fusion	24.53	NA	NA	13.12	13.50	3.15	NA	NA	40.80	41.18	090
22534		A	Lat thor/lumb, addll seg	5.99	NA	NA	2.25	2.84	1.25	NA	NA	9.49	10.08	ZZZ
22548		A	Neck spine fusion	26.78	NA	NA	14.66	15.55	5.59	NA	NA	47.03	47.92	090
22554		A	Neck spine fusion	17.48	NA	NA	11.21	12.09	4.45	NA	NA	33.14	34.02	090
22556		A	Thorax spine fusion	24.42	NA	NA	12.78	14.27	4.34	NA	NA	41.54	43.03	090
22558		A	Lumbar spine fusion	23.25	NA	NA	11.36	12.84	3.15	NA	NA	37.76	39.24	090
22585		A	Additional spinal fusion	5.52	NA	NA	2.02	2.61	1.25	NA	NA	8.79	9.38	ZZZ
22590		A	Spine & skull spinal fusion	21.48	NA	NA	12.77	13.21	4.78	NA	NA	39.03	39.47	090
22595		A	Neck spinal fusion	20.36	NA	NA	12.29	12.73	4.40	NA	NA	37.05	37.49	090
22600		A	Neck spine fusion	17.12	NA	NA	11.00	11.17	3.72	NA	NA	31.84	32.01	090
22610		A	Thorax spine fusion	17.00	NA	NA	10.63	11.24	3.52	NA	NA	31.15	31.76	090
22612		A	Lumbar spine fusion	22.50	NA	NA	12.61	13.83	4.46	NA	NA	39.57	40.79	090
22614		A	Spine fusion, extra segment	6.43	NA	NA	2.42	3.13	1.38	NA	NA	10.23	10.94	ZZZ
22630		A	Lumbar spine fusion	21.81	NA	NA	12.31	13.31	4.72	NA	NA	38.84	39.84	090
22632		A	Spine fusion, extra segment	5.22	NA	NA	1.95	2.49	1.16	NA	NA	8.33	8.87	ZZZ
22800		A	Fusion of spine	19.22	NA	NA	10.91	12.34	3.75	NA	NA	33.88	35.31	090
22802		A	Fusion of spine	31.83	NA	NA	15.80	18.69	6.15	NA	NA	53.78	56.67	090
22804		A	Fusion of spine	37.22	NA	NA	17.76	21.51	6.98	NA	NA	61.96	65.71	090
22808		A	Fusion of spine	27.23	NA	NA	13.54	15.65	4.92	NA	NA	45.69	47.80	090
22810		A	Fusion of spine	31.22	NA	NA	14.63	17.47	5.13	NA	NA	50.98	53.82	090
22812		A	Fusion of spine	33.90	NA	NA	16.45	19.20	5.28	NA	NA	55.63	58.38	090
22818		A	Kyphectomy, 1-2 segments	34.12	NA	NA	16.28	18.26	6.45	NA	NA	56.85	58.83	090
22819		A	Kyphectomy, 3 or more	39.10	NA	NA	18.97	19.83	7.65	NA	NA	65.72	66.58	090
22830		A	Exploration of spinal fusion	11.07	NA	NA	6.95	7.72	2.29	NA	NA	20.31	21.08	090
22840		A	Insert spine fixation device	12.52	NA	NA	4.70	6.06	2.78	NA	NA	20.00	21.36	ZZZ
22842		A	Insert spine fixation device	12.56	NA	NA	4.72	6.07	2.74	NA	NA	20.02	21.37	ZZZ
22843		A	Insert spine fixation device	13.44	NA	NA	5.11	6.24	2.85	NA	NA	21.40	22.53	ZZZ
22844		A	Insert spine fixation device	16.42	NA	NA	6.29	8.16	3.18	NA	NA	25.89	27.76	ZZZ
22845		A	Insert spine fixation device	11.94	NA	NA	4.40	5.67	2.85	NA	NA	19.19	20.46	ZZZ
22846		A	Insert spine fixation device	12.40	NA	NA	4.57	5.91	2.95	NA	NA	19.92	21.26	ZZZ
22847		A	Insert spine fixation device	13.78	NA	NA	5.17	6.57	2.99	NA	NA	21.94	23.34	ZZZ
22848		A	Insert pelv fixation device	5.99	NA	NA	2.30	2.97	1.15	NA	NA	9.44	10.11	ZZZ
22849		A	Reinsert spinal fixation	19.02	NA	NA	9.92	11.30	3.89	NA	NA	32.83	34.21	090
22850		A	Remove spine fixation device	9.69	NA	NA	6.26	6.82	2.04	NA	NA	17.99	18.55	090
22851		A	Apply spine prosth device	6.70	NA	NA	2.50	3.15	1.49	NA	NA	10.69	11.34	ZZZ
22852		A	Remove spine fixation device	9.24	NA	NA	5.99	6.61	1.89	NA	NA	17.12	17.74	090
22855		A	Remove spine fixation device	15.71	NA	NA	8.93	9.50	3.51	NA	NA	28.15	28.72	090
22900		A	Remove abdominal wall lesion	6.09	NA	NA	3.47	3.29	0.76	NA	NA	10.32	10.14	090
23000		A	Removal of calcium deposits	4.35	7.75	8.35	3.63	4.23	0.68	12.78	13.38	8.66	9.26	090
23020		A	Release shoulder joint	9.16	NA	NA	6.37	7.28	1.54	NA	NA	17.07	17.98	090
23030		A	Drain shoulder lesion	3.42	6.26	7.12	2.38	2.78	0.57	10.25	11.11	6.37	6.77	010
23031		A	Drain shoulder bursa	2.74	6.44	7.52	2.19	2.60	0.46	9.64	10.72	5.39	5.80	010

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
23035		A	Drain shoulder bone lesion	8.96	NA	NA	6.91	7.95	1.47	NA	NA	17.34	18.38	090
23040		A	Exploratory shoulder surgery	9.55	NA	NA	6.65	7.57	1.60	NA	NA	17.80	18.72	090
23044		A	Exploratory shoulder surgery	7.41	NA	NA	5.48	6.21	1.24	NA	NA	14.13	14.86	090
23065		A	Biopsy shoulder tissues	2.27	2.93	2.60	1.71	1.64	0.20	5.40	5.07	4.18	4.11	010
23066		A	Biopsy shoulder tissues	4.15	7.67	7.69	3.56	3.88	0.63	12.45	12.47	8.34	8.66	090
23075		A	Removal of shoulder lesion	2.39	3.71	3.68	1.72	1.77	0.34	6.44	6.41	4.45	4.50	010
23076		A	Removal of shoulder lesion	7.68	NA	NA	5.25	5.49	1.13	NA	NA	14.06	14.30	090
23077		A	Remove tumor of shoulder	17.98	NA	NA	9.59	10.08	2.33	NA	NA	29.90	30.39	090
23100		A	Biopsy of shoulder joint	6.02	NA	NA	5.04	5.51	1.04	NA	NA	12.10	12.57	090
23101		A	Shoulder joint surgery	5.57	NA	NA	4.49	5.14	0.96	NA	NA	11.02	11.67	090
23105		A	Remove shoulder joint lining	8.28	NA	NA	5.99	6.85	1.42	NA	NA	15.69	16.55	090
23106		A	Incision of collarbone joint	5.95	NA	NA	4.55	5.43	0.99	NA	NA	11.49	12.37	090
23107		A	Explore treat shoulder joint	8.67	NA	NA	6.14	7.09	1.49	NA	NA	16.30	17.25	090
23120		A	Partial removal, collar bone	7.16	NA	NA	5.38	6.21	1.23	NA	NA	13.77	14.60	090
23125		A	Removal of collar bone	9.44	NA	NA	6.22	7.24	1.62	NA	NA	17.28	18.30	090
23130		A	Remove shoulder bone, part	7.54	NA	NA	5.98	6.86	1.30	NA	NA	14.82	15.70	090
23140		A	Removal of bone lesion	6.94	NA	NA	4.73	5.11	1.08	NA	NA	12.75	13.13	090
23145		A	Removal of bone lesion	9.20	NA	NA	5.70	7.02	1.49	NA	NA	16.39	17.71	090
23146		A	Removal of bone lesion	7.88	NA	NA	5.86	6.81	1.35	NA	NA	15.09	16.04	090
23150		A	Removal of humerus lesion	8.71	NA	NA	5.94	6.69	1.32	NA	NA	15.97	16.72	090
23155		A	Removal of humerus lesion	10.63	NA	NA	7.20	8.06	1.80	NA	NA	19.63	20.49	090
23156		A	Removal of humerus lesion	8.91	NA	NA	6.28	7.12	1.50	NA	NA	16.69	17.53	090
23170		A	Remove collar bone lesion	7.03	NA	NA	5.01	5.78	1.12	NA	NA	13.16	13.93	090
23172		A	Remove shoulder blade lesion	7.13	NA	NA	4.90	5.95	1.01	NA	NA	13.04	14.09	090
23174		A	Remove humerus lesion	9.80	NA	NA	7.15	8.07	1.65	NA	NA	18.60	19.52	090
23180		A	Remove collar bone lesion	8.76	NA	NA	6.96	8.51	1.47	NA	NA	17.19	18.74	090
23182		A	Remove shoulder blade lesion	8.38	NA	NA	6.80	8.13	1.37	NA	NA	16.55	17.88	090
23184		A	Remove humerus lesion	9.67	NA	NA	7.41	8.86	1.63	NA	NA	18.71	20.16	090
23190		A	Partial removal of scapula	7.29	NA	NA	5.32	5.97	1.17	NA	NA	13.78	14.43	090
23195		A	Removal of head of humerus	10.16	NA	NA	6.65	7.48	1.70	NA	NA	18.51	19.34	090
23200		A	Removal of collar bone	12.60	NA	NA	7.41	8.42	1.93	NA	NA	21.94	22.95	090
23210		A	Removal of shoulder blade	13.07	NA	NA	8.09	8.79	2.02	NA	NA	23.18	23.88	090
23220		A	Partial removal of humerus	15.26	NA	NA	8.92	10.37	2.48	NA	NA	26.66	28.11	090
23221		A	Partial removal of humerus	18.31	NA	NA	6.48	10.43	3.05	NA	NA	27.84	31.79	090
23222		A	Partial removal of humerus	25.36	NA	NA	13.27	15.19	3.94	NA	NA	42.57	44.49	090
23330		A	Remove shoulder foreign body	1.85	3.34	3.60	1.51	1.80	0.24	5.43	5.69	3.60	3.89	010
23331		A	Remove shoulder foreign body	7.43	NA	NA	5.77	6.55	1.27	NA	NA	14.47	15.25	090
23332		A	Remove shoulder foreign body	12.14	NA	NA	7.85	8.98	2.02	NA	NA	22.01	23.14	090
23350		A	Injection for shoulder x-ray	1.00	2.83	3.31	0.35	0.34	0.06	3.89	4.37	1.41	1.40	000
23395		A	Muscle transfer,shoulder/arm	18.19	NA	NA	11.02	12.43	2.93	NA	NA	32.14	33.55	090
23397		A	Muscle transfers	16.53	NA	NA	9.49	10.92	2.73	NA	NA	28.75	30.18	090
23400		A	Fixation of shoulder blade	13.64	NA	NA	8.38	9.67	2.29	NA	NA	24.31	25.60	090
23405		A	Incision of tendon & muscle	8.36	NA	NA	5.85	6.67	1.45	NA	NA	15.66	16.48	090
23406		A	Incise tendon(s) & muscle(s)	10.83	NA	NA	6.80	7.97	1.87	NA	NA	19.50	20.67	090
23410		A	Repair rotator cuff, acute	12.55	NA	NA	7.66	8.99	2.16	NA	NA	22.37	23.70	090
23412		A	Repair rotator cuff, chronic	13.47	NA	NA	8.04	9.45	2.31	NA	NA	23.82	25.23	090
23415		A	Release of shoulder ligament	10.02	NA	NA	6.48	7.63	1.73	NA	NA	18.23	19.38	090
23420		A	Repair of shoulder	14.65	NA	NA	9.58	10.55	2.31	NA	NA	26.54	27.51	090
23430		A	Repair biceps tendon	9.97	NA	NA	6.66	7.76	1.73	NA	NA	18.36	19.46	090
23440		A	Remove/transplant tendon	10.46	NA	NA	6.67	7.88	1.82	NA	NA	18.95	20.16	090
23450		A	Repair shoulder capsule	13.50	NA	NA	8.02	9.41	2.32	NA	NA	23.84	25.23	090
23455		A	Repair shoulder capsule	14.47	NA	NA	8.41	9.96	2.49	NA	NA	25.37	26.92	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
23460		A	Repair shoulder capsule	15.59	NA	NA	9.17	10.84	2.66	NA	NA	27.42	29.09	090
23462		A	Repair shoulder capsule	15.52	NA	NA	8.90	10.31	2.59	NA	NA	27.01	28.42	090
23465		A	Repair shoulder capsule	16.07	NA	NA	9.40	10.76	2.76	NA	NA	28.23	29.59	090
23466		A	Repair shoulder capsule	15.45	NA	NA	9.89	11.02	2.46	NA	NA	27.80	28.93	090
23470		A	Reconstruct shoulder joint	17.66	NA	NA	9.99	11.72	2.98	NA	NA	30.63	32.36	090
23472		A	Reconstruct shoulder joint	22.39	NA	NA	11.99	13.84	3.66	NA	NA	38.04	39.89	090
23480		A	Revision of collar bone	11.34	NA	NA	7.21	8.40	1.94	NA	NA	20.49	21.68	090
23485		A	Revision of collar bone	13.71	NA	NA	8.14	9.48	2.33	NA	NA	24.18	25.52	090
23490		A	Reinforce clavicle	11.96	NA	NA	6.76	8.23	1.47	NA	NA	20.19	21.66	090
23491		A	Reinforce shoulder bones	14.31	NA	NA	8.69	10.23	2.46	NA	NA	25.46	27.00	090
23500		A	Treat clavicle fracture	2.08	2.61	2.81	2.68	2.57	0.30	4.99	5.19	5.06	4.95	090
23505		A	Treat clavicle fracture	3.68	3.97	4.31	3.57	3.78	0.61	8.26	8.60	7.86	8.07	090
23515		A	Treat clavicle fracture	7.40	NA	NA	5.48	6.30	1.28	NA	NA	14.16	14.98	090
23520		A	Treat clavicle dislocation	2.16	2.60	2.80	2.67	2.73	0.34	5.10	5.30	5.17	5.23	090
23525		A	Treat clavicle dislocation	3.59	4.45	4.53	3.87	3.93	0.46	8.50	8.58	7.92	7.98	090
23530		A	Treat clavicle dislocation	7.30	NA	NA	5.18	5.76	1.20	NA	NA	13.68	14.26	090
23532		A	Treat clavicle dislocation	8.00	NA	NA	5.97	6.74	1.38	NA	NA	15.35	16.12	090
23540		A	Treat clavicle dislocation	2.23	2.59	2.80	2.66	2.44	0.29	5.11	5.32	5.18	4.96	090
23545		A	Treat clavicle dislocation	3.25	3.71	4.08	3.23	3.34	0.35	7.31	7.68	6.83	6.94	090
23550		A	Treat clavicle dislocation	7.41	NA	NA	5.43	6.15	1.25	NA	NA	14.09	14.81	090
23552		A	Treat clavicle dislocation	8.62	NA	NA	6.12	7.04	1.46	NA	NA	16.20	17.12	090
23570		A	Treat shoulder blade fx	2.23	2.76	2.96	2.90	2.90	0.36	5.35	5.55	5.49	5.49	090
23575		A	Treat shoulder blade fx	4.05	4.29	4.74	3.80	4.19	0.59	8.93	9.38	8.44	8.83	090
23585		A	Treat scapula fracture	9.07	NA	NA	6.38	7.34	1.54	NA	NA	16.99	17.95	090
23600		A	Treat humerus fracture	2.93	4.03	4.43	3.61	3.57	0.48	7.44	7.84	7.02	6.98	090
23605		A	Treat humerus fracture	4.86	5.34	5.96	4.55	4.98	0.84	11.04	11.66	10.25	10.68	090
23615		A	Treat humerus fracture	10.83	NA	NA	8.16	8.69	1.62	NA	NA	20.61	21.14	090
23616		A	Treat humerus fracture	21.60	NA	NA	11.29	13.46	3.69	NA	NA	36.58	38.75	090
23620		A	Treat humerus fracture	2.40	3.38	3.56	3.11	3.02	0.40	6.18	6.36	5.91	5.82	090
23625		A	Treat humerus fracture	3.92	4.37	4.81	3.85	4.18	0.67	8.96	9.40	8.44	8.77	090
23630		A	Treat humerus fracture	7.40	NA	NA	5.57	6.38	1.27	NA	NA	14.24	15.05	090
23650		A	Treat shoulder dislocation	3.38	3.24	3.65	2.77	2.77	0.30	6.92	7.33	6.45	6.45	090
23655		A	Treat shoulder dislocation	4.56	NA	NA	4.11	4.16	0.69	NA	NA	9.36	9.41	090
23660		A	Treat shoulder dislocation	7.48	NA	NA	5.52	6.18	1.29	NA	NA	14.29	14.95	090
23665		A	Treat dislocation/fracture	4.46	4.77	5.21	4.19	4.60	0.71	9.94	10.38	9.36	9.77	090
23670		A	Treat dislocation/fracture	7.95	NA	NA	5.75	6.58	1.36	NA	NA	15.06	15.89	090
23675		A	Treat dislocation/fracture	6.04	6.06	6.65	5.08	5.66	1.01	13.11	13.70	12.13	12.71	090
23680		A	Treat dislocation/fracture	10.22	NA	NA	6.87	7.82	1.75	NA	NA	18.84	19.79	090
23700		A	Fixation of shoulder	2.52	NA	NA	1.88	2.11	0.44	NA	NA	4.84	5.07	010
23800		A	Fusion of shoulder joint	14.50	NA	NA	7.41	9.68	2.35	NA	NA	24.26	26.53	090
23802		A	Fusion of shoulder joint	18.07	NA	NA	10.76	10.34	2.70	NA	NA	31.53	31.11	090
23900		A	Amputation of arm & girdle	20.47	NA	NA	10.49	11.43	3.18	NA	NA	34.14	35.08	090
23920		A	Amputation at shoulder joint	15.95	NA	NA	9.37	9.81	2.46	NA	NA	27.78	28.22	090
23921		A	Amputation follow-up surgery	5.54	NA	NA	4.80	5.02	0.78	NA	NA	11.12	11.34	090
23930		A	Drainage of arm lesion	2.94	4.97	6.00	1.97	2.23	0.43	8.34	9.37	5.34	5.60	010
23931		A	Drainage of arm bursa	1.79	4.30	5.52	1.72	2.07	0.28	6.37	7.59	3.79	4.14	010
23935		A	Drain arm/elbow bone lesion	6.20	NA	NA	5.04	5.71	1.05	NA	NA	12.29	12.96	090
24000		A	Exploratory elbow surgery	5.93	NA	NA	4.69	5.25	0.97	NA	NA	11.59	12.15	090
24006		A	Release elbow joint	9.54	NA	NA	6.53	7.46	1.50	NA	NA	17.57	18.50	090
24065		A	Biopsy arm/elbow soft tissue	2.08	4.12	3.45	1.89	1.79	0.17	6.37	5.70	4.14	4.04	010
24066		A	Biopsy arm/elbow soft tissue	5.20	8.25	8.78	3.89	4.08	0.80	14.25	14.78	9.89	10.08	090
24075		A	Remove arm/elbow lesion	3.91	7.16	7.32	3.24	3.37	0.56	11.63	11.79	7.71	7.84	090
24076		A	Remove arm/elbow lesion	6.29	NA	NA	4.51	4.78	0.95	NA	NA	11.75	12.02	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
24077		A	Remove tumor of arm/elbow	11.86	NA	NA	6.82	7.53	1.72	NA	NA	20.40	21.11	090
24100		A	Biopsy elbow joint lining	4.92	NA	NA	4.19	4.45	0.85	NA	NA	9.96	10.22	090
24101		A	Explore/treat elbow joint	6.12	NA	NA	4.98	5.71	1.03	NA	NA	12.13	12.86	090
24102		A	Remove elbow joint lining	8.08	NA	NA	5.69	6.58	1.33	NA	NA	15.10	15.99	090
24105		A	Removal of elbow bursa	3.60	NA	NA	3.96	4.29	0.61	NA	NA	8.17	8.50	090
24110		A	Remove humerus lesion	7.38	NA	NA	5.55	6.40	1.28	NA	NA	14.21	15.06	090
24115		A	Remove/graft bone lesion	9.92	NA	NA	6.68	7.09	1.67	NA	NA	18.27	18.68	090
24116		A	Remove/graft bone lesion	12.03	NA	NA	7.50	8.70	2.05	NA	NA	21.58	22.78	090
24120		A	Remove elbow lesion	6.64	NA	NA	5.12	5.74	1.10	NA	NA	12.86	13.48	090
24125		A	Remove/graft bone lesion	7.94	NA	NA	5.90	6.11	1.06	NA	NA	14.90	15.11	090
24126		A	Remove/graft bone lesion	8.42	NA	NA	6.09	6.80	1.16	NA	NA	15.67	16.38	090
24130		A	Removal of head of radius	6.24	NA	NA	5.02	5.79	1.04	NA	NA	12.30	13.07	090
24134		A	Removal of arm bone lesion	10.02	NA	NA	7.35	8.50	1.64	NA	NA	19.01	20.16	090
24136		A	Remove radius bone lesion	8.22	NA	NA	5.93	6.91	1.38	NA	NA	15.53	16.51	090
24138		A	Remove elbow bone lesion	8.22	NA	NA	6.58	7.50	1.34	NA	NA	16.14	17.06	090
24140		A	Partial removal of arm bone	9.35	NA	NA	7.07	8.62	1.51	NA	NA	17.93	19.48	090
24145		A	Partial removal of radius	7.63	NA	NA	6.19	7.61	1.25	NA	NA	15.07	16.49	090
24147		A	Partial removal of elbow	7.59	NA	NA	6.79	8.16	1.30	NA	NA	15.68	17.05	090
24149		A	Radical resection of elbow	15.80	NA	NA	10.66	11.40	2.34	NA	NA	28.80	29.54	090
24150		A	Extensive humerus surgery	13.61	NA	NA	8.37	9.61	2.32	NA	NA	24.30	25.54	090
24151		A	Extensive humerus surgery	15.98	NA	NA	9.58	11.05	2.59	NA	NA	28.15	29.62	090
24152		A	Extensive radius surgery	10.16	NA	NA	6.17	7.36	1.48	NA	NA	17.81	19.00	090
24153		A	Extensive radius surgery	11.64	NA	NA	6.32	5.77	0.74	NA	NA	18.70	18.15	090
24155		A	Removal of elbow joint	11.89	NA	NA	7.46	8.18	1.92	NA	NA	21.27	21.99	090
24160		A	Remove elbow joint implant	7.82	NA	NA	5.73	6.62	1.30	NA	NA	14.85	15.74	090
24164		A	Remove radius head implant	6.28	NA	NA	4.84	5.55	1.03	NA	NA	12.15	12.86	090
24200		A	Removal of arm foreign body	1.76	2.75	3.25	1.36	1.56	0.20	4.71	5.21	3.32	3.52	010
24201		A	Removal of arm foreign body	4.55	7.88	9.35	3.68	4.10	0.72	13.15	14.62	8.95	9.37	090
24220		A	Injection for elbow x-ray	1.31	2.73	3.41	0.45	0.44	0.08	4.12	4.80	1.84	1.83	000
24300		A	Manipulate elbow w/anesth	3.74	NA	NA	5.10	5.57	0.65	NA	NA	9.49	9.96	090
24301		A	Muscle/tendon transfer	10.18	NA	NA	6.72	7.83	1.66	NA	NA	18.56	19.67	090
24305		A	Arm tendon lengthening	7.44	NA	NA	5.56	6.44	1.15	NA	NA	14.15	15.03	090
24310		A	Revision of arm tendon	5.97	NA	NA	4.71	5.38	0.96	NA	NA	11.64	12.31	090
24320		A	Repair of arm tendon	10.66	NA	NA	6.97	7.41	1.73	NA	NA	19.36	19.80	090
24330		A	Revision of arm muscles	9.59	NA	NA	6.52	7.56	1.60	NA	NA	17.71	18.75	090
24331		A	Revision of arm muscles	10.75	NA	NA	6.40	8.13	1.77	NA	NA	18.92	20.65	090
24332		A	Tenolysis, triceps	7.69	NA	NA	5.69	6.52	1.23	NA	NA	14.61	15.44	090
24340		A	Repair of biceps tendon	7.88	NA	NA	5.89	6.72	1.36	NA	NA	15.13	15.96	090
24341		A	Repair arm tendon/muscle	9.14	NA	NA	7.40	7.81	1.36	NA	NA	17.90	18.31	090
24342		A	Repair of ruptured tendon	10.66	NA	NA	6.97	8.15	1.85	NA	NA	19.48	20.66	090
24343		A	Repr elbow lat ligmnt w/tiss	8.89	NA	NA	6.90	7.85	1.43	NA	NA	17.22	18.17	090
24344		A	Reconstruct elbow lat ligmnt	14.85	NA	NA	9.86	11.13	2.36	NA	NA	27.07	28.34	090
24345		A	Repr elbw med ligmnt w/tissu	8.89	NA	NA	6.85	7.74	1.44	NA	NA	17.18	18.07	090
24346		A	Reconstruct elbow med ligmnt	14.85	NA	NA	9.87	11.00	2.33	NA	NA	27.05	28.18	090
24350		A	Repair of tennis elbow	5.24	NA	NA	4.81	5.40	0.87	NA	NA	10.92	11.51	090
24351		A	Repair of tennis elbow	5.90	NA	NA	4.92	5.69	1.02	NA	NA	11.84	12.61	090
24352		A	Repair of tennis elbow	6.42	NA	NA	5.13	5.93	1.10	NA	NA	12.65	13.45	090
24354		A	Repair of tennis elbow	6.47	NA	NA	5.16	5.92	1.07	NA	NA	12.70	13.46	090
24356		A	Revision of tennis elbow	6.67	NA	NA	5.23	6.06	1.11	NA	NA	13.01	13.84	090
24360		A	Reconstruct elbow joint	12.44	NA	NA	7.82	9.08	2.05	NA	NA	22.31	23.57	090
24361		A	Reconstruct elbow joint	14.18	NA	NA	8.60	10.11	2.18	NA	NA	24.96	26.47	090
24362		A	Reconstruct elbow joint	15.09	NA	NA	9.11	9.83	2.60	NA	NA	26.80	27.52	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
24363		A	Replace elbow joint	22.39	NA	NA	12.69	13.49	3.01	NA	NA	38.09	38.89	090
24365		A	Reconstruct head of radius	8.44	NA	NA	5.83	6.87	1.41	NA	NA	15.68	16.72	090
24366		A	Reconstruct head of radius	9.18	NA	NA	6.19	7.22	1.52	NA	NA	16.89	17.92	090
24400		A	Revision of humerus	11.10	NA	NA	7.48	8.53	1.92	NA	NA	20.50	21.55	090
24410		A	Revision of humerus	14.86	NA	NA	9.14	10.04	2.57	NA	NA	26.57	27.47	090
24420		A	Revision of humerus	13.48	NA	NA	8.65	10.09	2.17	NA	NA	24.30	25.74	090
24430		A	Repair of humerus	14.99	NA	NA	8.73	9.51	2.21	NA	NA	25.93	26.71	090
24435		A	Repair humerus with graft	14.64	NA	NA	9.68	10.60	2.27	NA	NA	26.59	27.51	090
24470		A	Revision of elbow joint	8.73	NA	NA	6.31	7.38	1.48	NA	NA	16.52	17.59	090
24495		A	Decompression of forearm	8.23	NA	NA	6.68	8.25	1.18	NA	NA	16.09	17.66	090
24498		A	Reinforce humerus	12.08	NA	NA	7.59	8.87	2.06	NA	NA	21.73	23.01	090
24500		A	Treat humerus fracture	3.21	4.38	4.74	3.75	3.71	0.50	8.09	8.45	7.46	7.42	090
24505		A	Treat humerus fracture	5.16	5.78	6.41	4.82	5.26	0.89	11.83	12.46	10.87	11.31	090
24515		A	Treat humerus fracture	11.87	NA	NA	7.94	9.04	2.02	NA	NA	21.83	22.93	090
24516		A	Treat humerus fracture	11.99	NA	NA	7.56	8.75	2.02	NA	NA	21.57	22.76	090
24530		A	Treat humerus fracture	3.49	4.67	5.08	3.94	4.02	0.57	8.73	9.14	8.00	8.08	090
24535		A	Treat humerus fracture	6.86	6.73	7.58	5.77	6.42	1.18	14.77	15.62	13.81	14.46	090
24538		A	Treat humerus fracture	9.54	NA	NA	7.12	8.33	1.64	NA	NA	18.30	19.51	090
24545		A	Treat humerus fracture	10.80	NA	NA	7.10	8.13	1.82	NA	NA	19.72	20.75	090
24546		A	Treat humerus fracture	15.91	NA	NA	9.12	10.79	2.73	NA	NA	27.76	29.43	090
24560		A	Treat humerus fracture	2.80	4.00	4.37	3.33	3.23	0.44	7.24	7.61	6.57	6.47	090
24565		A	Treat humerus fracture	5.55	5.76	6.41	4.88	5.38	0.93	12.24	12.89	11.36	11.86	090
24566		A	Treat humerus fracture	8.78	NA	NA	6.86	7.85	1.30	NA	NA	16.94	17.93	090
24575		A	Treat humerus fracture	10.94	NA	NA	7.15	8.10	1.86	NA	NA	19.95	20.90	090
24576		A	Treat humerus fracture	2.86	4.38	4.67	3.68	3.71	0.46	7.70	7.99	7.00	7.03	090
24577		A	Treat humerus fracture	5.78	5.95	6.70	5.01	5.65	0.95	12.68	13.43	11.74	12.38	090
24579		A	Treat humerus fracture	11.88	NA	NA	7.53	8.53	2.02	NA	NA	21.43	22.43	090
24582		A	Treat humerus fracture	9.79	NA	NA	8.07	8.87	1.48	NA	NA	19.34	20.14	090
24586		A	Treat elbow fracture	15.55	NA	NA	9.18	10.74	2.64	NA	NA	27.37	28.93	090
24587		A	Treat elbow fracture	15.56	NA	NA	9.23	10.60	2.52	NA	NA	27.31	28.68	090
24600		A	Treat elbow dislocation	4.22	3.82	4.61	3.24	3.44	0.50	8.54	9.33	7.96	8.16	090
24605		A	Treat elbow dislocation	5.41	NA	NA	4.88	5.26	0.89	NA	NA	11.18	11.56	090
24615		A	Treat elbow dislocation	9.65	NA	NA	6.46	7.50	1.60	NA	NA	17.71	18.75	090
24620		A	Treat elbow fracture	6.97	NA	NA	5.38	6.05	1.07	NA	NA	13.42	14.09	090
24635		A	Treat elbow fracture	13.47	NA	NA	10.05	13.08	2.28	NA	NA	25.80	28.83	090
24640		A	Treat elbow dislocation	1.20	1.46	1.75	0.79	0.80	0.12	2.78	3.07	2.11	2.12	010
24650		A	Treat radius fracture	2.16	3.39	3.69	2.96	2.81	0.35	5.90	6.20	5.47	5.32	090
24655		A	Treat radius fracture	4.39	5.13	5.76	4.35	4.69	0.70	10.22	10.85	9.44	9.78	090
24665		A	Treat radius fracture	8.13	NA	NA	6.23	7.21	1.41	NA	NA	15.77	16.75	090
24666		A	Treat radius fracture	9.66	NA	NA	6.68	7.74	1.62	NA	NA	17.96	19.02	090
24670		A	Treat ulnar fracture	2.54	3.68	4.01	3.11	3.09	0.41	6.63	6.96	6.06	6.04	090
24675		A	Treat ulnar fracture	4.71	5.24	5.83	4.44	4.85	0.81	10.76	11.35	9.96	10.37	090
24685		A	Treat ulnar fracture	8.85	NA	NA	6.17	7.20	1.52	NA	NA	16.54	17.57	090
24800		A	Fusion of elbow joint	11.18	NA	NA	7.51	8.46	1.63	NA	NA	20.32	21.27	090
24802		A	Fusion/graft of elbow joint	14.09	NA	NA	8.42	9.91	2.37	NA	NA	24.88	26.37	090
24900		A	Amputation of upper arm	9.95	NA	NA	6.38	6.91	1.53	NA	NA	17.86	18.39	090
24920		A	Amputation of upper arm	9.95	NA	NA	6.28	6.79	1.61	NA	NA	17.84	18.35	090
24925		A	Amputation follow-up surgery	7.12	NA	NA	4.92	5.81	1.14	NA	NA	13.18	14.07	090
24930		A	Amputation follow-up surgery	10.65	NA	NA	5.88	6.92	1.67	NA	NA	18.20	19.24	090
24931		A	Amputate upper arm & implant	13.24	NA	NA	8.08	6.33	1.89	NA	NA	23.21	21.46	090
24935		A	Revision of amputation	16.20	NA	NA	7.29	7.85	2.13	NA	NA	25.62	26.18	090
25000		A	Incision of tendon sheath	3.37	NA	NA	4.99	6.42	0.55	NA	NA	8.91	10.34	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
25001		A	Incise flexor carpi radialis	3.62	NA	NA	3.79	4.13	0.55	NA	NA	7.96	8.30	090
25020		A	Decompress forearm 1 space	5.91	NA	NA	6.81	8.90	0.93	NA	NA	13.65	15.74	090
25023		A	Decompress forearm 1 space	13.60	NA	NA	11.31	14.06	2.03	NA	NA	26.94	29.69	090
25024		A	Decompress forearm 2 spaces	10.52	NA	NA	7.11	7.40	1.36	NA	NA	18.99	19.28	090
25025		A	Decompress forearm 2 spaces	17.67	NA	NA	8.92	9.73	1.82	NA	NA	28.41	29.22	090
25028		A	Drainage of forearm lesion	5.24	NA	NA	6.19	7.68	0.81	NA	NA	12.24	13.73	090
25031		A	Drainage of forearm bursa	4.13	NA	NA	5.40	7.31	0.63	NA	NA	10.16	12.07	090
25035		A	Treat forearm bone lesion	7.47	NA	NA	8.75	12.41	1.24	NA	NA	17.46	21.12	090
25040		A	Explore/treat wrist joint	7.35	NA	NA	5.80	6.94	1.15	NA	NA	14.30	15.44	090
25065		A	Biopsy forearm soft tissues	1.99	4.23	3.48	1.92	1.91	0.15	6.37	5.62	4.06	4.05	010
25066		A	Biopsy forearm soft tissues	4.12	NA	NA	5.39	6.66	0.64	NA	NA	10.15	11.42	090
25075		A	Removal forearm lesion subcu	3.73	NA	NA	4.86	5.65	0.55	NA	NA	9.14	9.93	090
25076		A	Removal forearm lesion deep	4.91	NA	NA	6.83	8.89	0.74	NA	NA	12.48	14.54	090
25077		A	Remove tumor, forearm/wrist	9.81	NA	NA	8.82	11.30	1.42	NA	NA	20.05	22.53	090
25085		A	Incision of wrist capsule	5.49	NA	NA	5.36	6.70	0.85	NA	NA	11.70	13.04	090
25100		A	Biopsy of wrist joint	3.89	NA	NA	4.21	5.02	0.59	NA	NA	8.69	9.50	090
25101		A	Explore/treat wrist joint	4.68	NA	NA	4.75	5.62	0.75	NA	NA	10.18	11.05	090
25105		A	Remove wrist joint lining	5.84	NA	NA	5.73	6.92	0.92	NA	NA	12.49	13.68	090
25107		A	Remove wrist joint cartilage	7.42	NA	NA	7.04	8.03	0.99	NA	NA	15.45	16.44	090
25110		A	Remove wrist tendon lesion	3.91	NA	NA	5.23	6.61	0.62	NA	NA	9.76	11.14	090
25111		A	Remove wrist tendon lesion	3.38	NA	NA	4.05	4.55	0.53	NA	NA	7.96	8.46	090
25112		A	Reremove wrist tendon lesion	4.52	NA	NA	4.47	5.07	0.70	NA	NA	9.69	10.29	090
25115		A	Remove wrist/forearm lesion	9.81	NA	NA	10.05	13.07	1.31	NA	NA	21.17	24.19	090
25116		A	Remove wrist/forearm lesion	7.28	NA	NA	8.95	12.12	1.11	NA	NA	17.34	20.51	090
25118		A	Excise wrist tendon sheath	4.36	NA	NA	4.56	5.46	0.68	NA	NA	9.60	10.50	090
25119		A	Partial removal of ulna	6.03	NA	NA	5.77	7.16	0.96	NA	NA	12.76	14.15	090
25120		A	Removal of forearm lesion	6.09	NA	NA	7.82	11.05	1.00	NA	NA	14.91	18.14	090
25125		A	Remove/graft forearm lesion	7.47	NA	NA	8.63	11.82	1.06	NA	NA	17.16	20.35	090
25126		A	Remove/graft forearm lesion	7.54	NA	NA	8.65	11.95	1.27	NA	NA	17.46	20.76	090
25130		A	Removal of wrist lesion	5.25	NA	NA	5.13	6.11	0.80	NA	NA	11.18	12.16	090
25135		A	Remove & graft wrist lesion	6.88	NA	NA	6.02	7.15	1.02	NA	NA	13.92	15.05	090
25136		A	Remove & graft wrist lesion	5.96	NA	NA	5.44	6.32	1.03	NA	NA	12.43	13.31	090
25145		A	Remove forearm bone lesion	6.36	NA	NA	8.00	11.07	1.01	NA	NA	15.37	18.44	090
25150		A	Partial removal of ulna	7.20	NA	NA	6.27	7.74	1.14	NA	NA	14.61	16.08	090
25151		A	Partial removal of radius	7.50	NA	NA	8.39	11.67	1.18	NA	NA	17.07	20.35	090
25170		A	Extensive forearm surgery	11.25	NA	NA	10.37	13.99	1.77	NA	NA	23.39	27.01	090
25210		A	Removal of wrist bone	5.94	NA	NA	5.44	6.47	0.88	NA	NA	12.26	13.29	090
25215		A	Removal of wrist bones	7.94	NA	NA	6.72	8.27	1.19	NA	NA	15.85	17.40	090
25230		A	Partial removal of radius	5.22	NA	NA	4.88	5.84	0.79	NA	NA	10.89	11.85	090
25240		A	Partial removal of ulna	5.16	NA	NA	5.19	6.53	0.81	NA	NA	11.16	12.50	090
25246		A	Injection for wrist x-ray	1.45	2.80	3.29	0.51	0.49	0.09	4.34	4.83	2.05	2.03	000
25248		A	Remove forearm foreign body	5.13	NA	NA	6.50	8.03	0.72	NA	NA	12.35	13.88	090
25250		A	Removal of wrist prosthesis	6.59	NA	NA	5.23	5.90	1.01	NA	NA	12.83	13.50	090
25251		A	Removal of wrist prosthesis	9.62	NA	NA	6.59	7.60	1.26	NA	NA	17.47	18.48	090
25259		A	Manipulate wrist w/anesthes	3.74	NA	NA	5.06	5.57	0.62	NA	NA	9.42	9.93	090
25260		A	Repair forearm tendon/muscle	7.79	NA	NA	9.08	12.28	1.19	NA	NA	18.06	21.26	090
25263		A	Repair forearm tendon/muscle	7.81	NA	NA	8.83	12.18	1.18	NA	NA	17.82	21.17	090
25265		A	Repair forearm tendon/muscle	9.87	NA	NA	9.85	13.23	1.47	NA	NA	21.19	24.57	090
25270		A	Repair forearm tendon/muscle	5.99	NA	NA	7.78	10.99	0.95	NA	NA	14.72	17.93	090
25272		A	Repair forearm tendon/muscle	7.03	NA	NA	8.25	11.69	1.11	NA	NA	16.39	19.83	090
25274		A	Repair forearm tendon/muscle	8.74	NA	NA	9.06	12.51	1.36	NA	NA	19.16	22.61	090
25275		A	Repair forearm tendon sheath	8.74	NA	NA	6.38	7.30	1.31	NA	NA	16.43	17.35	090
25280		A	Revise wrist/forearm tendon	7.21	NA	NA	8.33	11.59	1.08	NA	NA	16.62	19.88	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
25290		A	Incise wrist/forearm tendon	5.28	NA	NA	9.05	13.54	0.82	NA	NA	15.15	19.64	090
25295		A	Release wrist/forearm tendon	6.54	NA	NA	8.02	11.15	1.00	NA	NA	15.56	18.69	090
25300		A	Fusion of tendons at wrist	8.79	NA	NA	7.06	8.12	1.26	NA	NA	17.11	18.17	090
25301		A	Fusion of tendons at wrist	8.39	NA	NA	6.61	7.71	1.29	NA	NA	16.29	17.39	090
25310		A	Transplant forearm tendon	8.19	NA	NA	8.68	11.97	1.21	NA	NA	18.08	21.37	090
25312		A	Transplant forearm tendon	9.62	NA	NA	9.46	12.85	1.41	NA	NA	20.49	23.88	090
25315		A	Revise palsy hand tendon(s)	10.48	NA	NA	9.82	13.29	1.58	NA	NA	21.88	25.35	090
25316		A	Revise palsy hand tendon(s)	12.67	NA	NA	10.89	14.93	1.74	NA	NA	25.30	29.34	090
25320		A	Repair/revise wrist joint	12.28	NA	NA	10.20	11.12	1.61	NA	NA	24.09	25.01	090
25332		A	Revise wrist joint	11.51	NA	NA	7.59	8.80	1.83	NA	NA	20.93	22.14	090
25335		A	Realignment of hand	13.16	NA	NA	6.87	10.43	1.92	NA	NA	21.95	25.51	090
25337		A	Reconstruct ulna/radioulnar	11.36	NA	NA	9.24	10.64	1.61	NA	NA	22.21	23.61	090
25350		A	Revision of radius	8.89	NA	NA	9.12	12.79	1.46	NA	NA	19.47	23.14	090
25355		A	Revision of radius	10.33	NA	NA	9.86	13.45	1.73	NA	NA	21.92	25.51	090
25360		A	Revision of ulna	8.54	NA	NA	8.99	12.68	1.41	NA	NA	18.94	22.63	090
25365		A	Revise radius & ulna	12.68	NA	NA	10.88	14.49	2.15	NA	NA	25.71	29.32	090
25370		A	Revise radius or ulna	13.82	NA	NA	11.76	15.03	2.28	NA	NA	27.86	31.13	090
25375		A	Revise radius & ulna	13.32	NA	NA	11.14	15.14	2.26	NA	NA	26.72	30.72	090
25390		A	Shorten radius or ulna	10.50	NA	NA	9.78	13.41	1.65	NA	NA	21.93	25.56	090
25391		A	Lengthen radius or ulna	14.05	NA	NA	11.46	15.32	2.21	NA	NA	27.72	31.58	090
25392		A	Shorten radius & ulna	14.35	NA	NA	11.59	14.91	2.10	NA	NA	28.04	31.36	090
25393		A	Lengthen radius & ulna	16.33	NA	NA	12.90	16.45	2.76	NA	NA	31.99	35.54	090
25394		A	Repair carpal bone, shorten	10.63	NA	NA	6.67	7.73	1.59	NA	NA	18.89	19.95	090
25400		A	Repair radius or ulna	11.08	NA	NA	10.01	13.93	1.82	NA	NA	22.91	26.83	090
25405		A	Repair/graft radius or ulna	14.78	NA	NA	11.72	15.92	2.32	NA	NA	28.82	33.02	090
25415		A	Repair radius & ulna	13.57	NA	NA	10.81	15.12	2.17	NA	NA	26.55	30.86	090
25420		A	Repair/graft radius & ulna	16.79	NA	NA	12.55	16.88	2.61	NA	NA	31.95	36.28	090
25425		A	Repair/graft radius or ulna	13.49	NA	NA	13.91	19.57	2.08	NA	NA	29.48	35.14	090
25426		A	Repair/graft radius & ulna	16.22	NA	NA	12.27	15.52	2.54	NA	NA	31.03	34.28	090
25430		A	Vasc graft into carpal bone	9.49	NA	NA	6.67	7.19	1.27	NA	NA	17.43	17.95	090
25431		A	Repair nonunion carpal bone	10.67	NA	NA	7.13	8.10	1.90	NA	NA	19.70	20.67	090
25440		A	Repair/graft wrist bone	10.48	NA	NA	7.36	8.91	1.63	NA	NA	19.47	21.02	090
25441		A	Reconstruct wrist joint	13.06	NA	NA	8.32	9.60	2.07	NA	NA	23.45	24.73	090
25442		A	Reconstruct wrist joint	10.89	NA	NA	7.19	8.48	1.53	NA	NA	19.61	20.90	090
25443		A	Reconstruct wrist joint	10.43	NA	NA	6.54	8.24	1.37	NA	NA	18.34	20.04	090
25444		A	Reconstruct wrist joint	11.19	NA	NA	7.51	8.67	1.71	NA	NA	20.41	21.57	090
25445		A	Reconstruct wrist joint	9.68	NA	NA	6.59	7.66	1.55	NA	NA	17.82	18.89	090
25446		A	Wrist replacement	17.07	NA	NA	9.68	11.38	2.47	NA	NA	29.22	30.92	090
25447		A	Repair wrist joint(s)	10.85	NA	NA	7.30	8.34	1.61	NA	NA	19.76	20.80	090
25449		A	Remove wrist joint implant	14.71	NA	NA	8.87	10.24	2.21	NA	NA	25.79	27.16	090
25450		A	Revision of wrist joint	7.86	NA	NA	7.22	9.47	1.36	NA	NA	16.44	18.69	090
25455		A	Revision of wrist joint	9.48	NA	NA	6.38	9.76	0.96	NA	NA	16.82	20.20	090
25490		A	Reinforce radius	9.53	NA	NA	9.32	12.66	1.43	NA	NA	20.28	23.62	090
25491		A	Reinforce ulna	9.95	NA	NA	9.57	13.27	1.60	NA	NA	21.12	24.82	090
25492		A	Reinforce radius and ulna	12.43	NA	NA	10.42	14.11	2.14	NA	NA	24.99	28.68	090
25500		A	Treat fracture of radius	2.45	3.29	3.51	2.85	2.75	0.35	6.09	6.31	5.65	5.55	090
25505		A	Treat fracture of radius	5.20	5.78	6.37	4.93	5.31	0.90	11.88	12.47	11.03	11.41	090
25515		A	Treat fracture of radius	9.29	NA	NA	6.44	7.22	1.59	NA	NA	17.32	18.10	090
25520		A	Treat fracture of radius	6.25	5.89	6.63	5.31	5.89	1.08	13.22	13.96	12.64	13.22	090
25525		A	Treat fracture of radius	12.59	NA	NA	8.39	9.61	2.12	NA	NA	23.10	24.32	090
25526		A	Treat fracture of radius	13.33	NA	NA	10.05	12.67	2.19	NA	NA	25.57	28.19	090
25530		A	Treat fracture of ulna	2.09	3.43	3.69	2.92	2.88	0.34	5.86	6.12	5.35	5.31	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
25535		A	Treat fracture of ulna	5.13	5.60	5.92	4.85	5.20	0.89	11.62	11.94	10.87	11.22	090
25545		A	Treat fracture of ulna	9.01	NA	NA	6.33	7.34	1.53	NA	NA	16.87	17.88	090
25560		A	Treat fracture radius & ulna	2.44	3.34	3.61	2.83	2.67	0.35	6.13	6.40	5.62	5.46	090
25565		A	Treat fracture radius & ulna	5.62	5.88	6.51	4.90	5.31	0.93	12.43	13.06	11.45	11.86	090
25574		A	Treat fracture radius & ulna	7.37	NA	NA	6.34	7.00	1.21	NA	NA	14.92	15.58	090
25575		A	Treat fracture radius/ulna	11.92	NA	NA	8.65	9.32	1.81	NA	NA	22.38	23.05	090
25600		A	Treat fracture radius/ulna	2.63	3.64	3.99	3.13	3.02	0.42	6.69	7.04	6.18	6.07	090
25605		A	Treat fracture radius/ulna	6.92	6.80	7.14	6.08	6.20	1.00	14.72	15.06	14.00	14.12	090
25611		A	Treat fracture radius/ulna	9.13	NA	NA	8.01	8.75	1.34	NA	NA	18.48	19.22	090
25620		A	Treat fracture radius/ulna	8.54	NA	NA	5.98	6.96	1.42	NA	NA	15.94	16.92	090
25622		A	Treat wrist bone fracture	2.61	3.85	4.17	3.31	3.16	0.41	6.87	7.19	6.33	6.18	090
25624		A	Treat wrist bone fracture	4.52	5.52	6.12	4.67	4.98	0.76	10.80	11.40	9.95	10.26	090
25628		A	Treat wrist bone fracture	9.42	NA	NA	7.02	7.64	1.37	NA	NA	17.81	18.43	090
25630		A	Treat wrist bone fracture	2.88	3.71	4.07	3.20	3.01	0.45	7.04	7.40	6.53	6.34	090
25635		A	Treat wrist bone fracture	4.38	5.31	5.80	4.50	4.06	0.74	10.43	10.92	9.62	9.18	090
25645		A	Treat wrist bone fracture	7.24	NA	NA	5.52	6.37	1.20	NA	NA	13.96	14.81	090
25650		A	Treat wrist bone fracture	3.05	3.80	4.19	3.40	3.24	0.45	7.30	7.69	6.90	6.74	090
25651		A	Pin ulnar styloid fracture	5.60	NA	NA	5.04	5.39	0.86	NA	NA	11.50	11.85	090
25652		A	Treat fracture ulnar styloid	7.84	NA	NA	6.11	6.79	1.21	NA	NA	15.16	15.84	090
25660		A	Treat wrist dislocation	4.75	NA	NA	4.42	4.65	0.58	NA	NA	9.75	9.98	090
25670		A	Treat wrist dislocation	7.91	NA	NA	5.70	6.68	1.28	NA	NA	14.89	15.87	090
25671		A	Pin radioulnar dislocation	6.24	NA	NA	5.44	5.99	1.00	NA	NA	12.68	13.23	090
25675		A	Treat wrist dislocation	4.66	4.82	5.46	4.09	4.52	0.62	10.10	10.74	9.37	9.80	090
25676		A	Treat wrist dislocation	8.09	NA	NA	6.05	7.00	1.34	NA	NA	15.48	16.43	090
25680		A	Treat wrist fracture	5.98	NA	NA	4.29	4.64	0.78	NA	NA	11.05	11.40	090
25685		A	Treat wrist fracture	9.89	NA	NA	6.38	7.46	1.60	NA	NA	17.87	18.95	090
25690		A	Treat wrist dislocation	5.49	NA	NA	4.76	5.33	0.88	NA	NA	11.13	11.70	090
25695		A	Treat wrist dislocation	8.33	NA	NA	5.90	6.81	1.32	NA	NA	15.55	16.46	090
25800		A	Fusion of wrist joint	9.87	NA	NA	7.15	8.63	1.57	NA	NA	18.59	20.07	090
25805		A	Fusion/graft of wrist joint	11.50	NA	NA	8.02	9.72	1.80	NA	NA	21.32	23.02	090
25810		A	Fusion/graft of wrist joint	11.67	NA	NA	8.40	9.55	1.67	NA	NA	21.74	22.89	090
25820		A	Fusion of hand bones	7.44	NA	NA	6.18	7.45	1.22	NA	NA	14.84	16.11	090
25825		A	Fuse hand bones with graft	9.44	NA	NA	7.43	8.80	1.41	NA	NA	18.28	19.65	090
25830		A	Fusion, radioulnar jnt/ulna	10.61	NA	NA	10.30	13.41	1.55	NA	NA	22.46	25.57	090
25900		A	Amputation of forearm	9.36	NA	NA	9.16	11.74	1.30	NA	NA	19.82	22.40	090
25905		A	Amputation of forearm	9.41	NA	NA	8.39	11.35	1.40	NA	NA	19.20	22.16	090
25907		A	Amputation follow-up surgery	7.91	NA	NA	7.75	10.78	1.10	NA	NA	16.76	19.79	090
25909		A	Amputation follow-up surgery	9.13	NA	NA	8.90	11.46	1.44	NA	NA	19.47	22.03	090
25915		A	Amputation of forearm	17.30	NA	NA	8.05	16.21	2.93	NA	NA	28.28	36.44	090
25920		A	Amputate hand at wrist	8.85	NA	NA	6.61	7.56	1.35	NA	NA	16.81	17.76	090
25922		A	Amputate hand at wrist	7.47	NA	NA	6.27	6.87	1.12	NA	NA	14.86	15.46	090
25924		A	Amputation follow-up surgery	8.63	NA	NA	6.58	7.73	1.32	NA	NA	16.53	17.68	090
25927		A	Amputation of hand	8.91	NA	NA	8.51	10.91	1.27	NA	NA	18.69	21.09	090
25929		A	Amputation follow-up surgery	7.64	NA	NA	5.30	5.74	1.14	NA	NA	14.08	14.52	090
25931		A	Amputation follow-up surgery	7.86	NA	NA	8.38	10.71	1.15	NA	NA	17.39	19.72	090
26010		A	Drainage of finger abscess	1.54	3.98	5.18	1.49	1.60	0.18	5.70	6.90	3.21	3.32	010
26011		A	Drainage of finger abscess	2.19	6.22	8.19	1.95	2.24	0.33	8.74	10.71	4.47	4.76	010
26020		A	Drain hand tendon sheath	4.90	NA	NA	4.67	5.20	0.73	NA	NA	10.30	10.83	090
26025		A	Drainage of palm bursa	4.93	NA	NA	4.38	4.94	0.76	NA	NA	10.07	10.63	090
26030		A	Drainage of palm bursa(s)	6.10	NA	NA	4.90	5.53	0.92	NA	NA	11.92	12.55	090
26034		A	Treat hand bone lesion	6.40	NA	NA	5.46	6.14	1.01	NA	NA	12.87	13.55	090
26035		A	Decompress fingers/hand	11.04	NA	NA	7.85	7.88	1.47	NA	NA	20.36	20.39	090
26037		A	Decompress fingers/hand	7.42	NA	NA	5.41	6.11	1.13	NA	NA	13.96	14.66	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
26040		A	Release palm contracture	3.33	NA	NA	3.54	3.93	0.53	NA	NA	7.40	7.79	090
26045		A	Release palm contracture	5.55	NA	NA	4.80	5.45	0.93	NA	NA	11.28	11.93	090
26055		A	Incise finger tendon sheath	2.94	8.65	12.96	3.45	3.83	0.43	12.02	16.33	6.82	7.20	090
26060		A	Incision of finger tendon	2.81	NA	NA	3.00	3.39	0.45	NA	NA	6.26	6.65	090
26070		A	Explore/treat hand joint	3.68	NA	NA	2.99	3.28	0.48	NA	NA	7.15	7.44	090
26075		A	Explore/treat finger joint	3.78	NA	NA	3.36	3.68	0.53	NA	NA	7.67	7.99	090
26080		A	Explore/treat finger joint	4.29	NA	NA	4.27	4.71	0.66	NA	NA	9.22	9.66	090
26100		A	Biopsy hand joint lining	3.66	NA	NA	3.52	3.99	0.54	NA	NA	7.72	8.19	090
26105		A	Biopsy finger joint lining	3.70	NA	NA	3.68	4.10	0.59	NA	NA	7.97	8.39	090
26110		A	Biopsy finger joint lining	3.52	NA	NA	3.54	3.92	0.53	NA	NA	7.59	7.97	090
26115		A	Removal hand lesion subcut	3.85	9.73	12.28	4.16	4.63	0.59	14.17	16.72	8.60	9.07	090
26116		A	Removal hand lesion, deep	5.52	NA	NA	5.21	5.82	0.84	NA	NA	11.57	12.18	090
26117		A	Remove tumor, hand/finger	8.54	NA	NA	6.09	6.83	1.26	NA	NA	15.89	16.63	090
26121		A	Release palm contracture	7.53	NA	NA	5.83	6.69	1.17	NA	NA	14.53	15.39	090
26123		A	Release palm contracture	10.53	NA	NA	8.08	8.68	1.43	NA	NA	20.04	20.64	090
26125		A	Release palm contracture	4.60	NA	NA	1.85	2.30	0.70	NA	NA	7.15	7.60	ZZZ
26130		A	Remove wrist joint lining	5.41	NA	NA	4.76	5.21	0.94	NA	NA	11.11	11.56	090
26135		A	Revise finger joint, each	6.95	NA	NA	5.39	6.21	1.07	NA	NA	13.41	14.23	090
26140		A	Revise finger joint, each	6.16	NA	NA	5.08	5.82	0.92	NA	NA	12.16	12.90	090
26145		A	Tendon excision, palm/finger	6.31	NA	NA	5.10	5.83	0.97	NA	NA	12.38	13.11	090
26160		A	Remove tendon sheath lesion	3.40	8.79	11.51	3.73	4.03	0.49	12.68	15.40	7.62	7.92	090
26170		A	Removal of palm tendon, each	4.76	NA	NA	4.29	4.79	0.69	NA	NA	9.74	10.24	090
26180		A	Removal of finger tendon	5.17	NA	NA	4.69	5.25	0.78	NA	NA	10.64	11.20	090
26185		A	Remove finger bone	6.24	NA	NA	5.72	5.97	0.81	NA	NA	12.77	13.02	090
26200		A	Remove hand bone lesion	5.50	NA	NA	4.51	5.16	0.88	NA	NA	10.89	11.54	090
26205		A	Remove/graft bone lesion	7.75	NA	NA	5.75	6.62	1.20	NA	NA	14.70	15.57	090
26210		A	Removal of finger lesion	5.14	NA	NA	4.67	5.25	0.79	NA	NA	10.60	11.18	090
26215		A	Remove/graft finger lesion	7.09	NA	NA	5.46	6.11	0.98	NA	NA	13.53	14.18	090
26230		A	Partial removal of hand bone	6.32	NA	NA	4.92	5.68	1.01	NA	NA	12.25	13.01	090
26235		A	Partial removal, finger bone	6.18	NA	NA	4.87	5.59	0.95	NA	NA	12.00	12.72	090
26236		A	Partial removal, finger bone	5.31	NA	NA	4.47	5.12	0.81	NA	NA	10.59	11.24	090
26250		A	Extensive hand surgery	7.54	NA	NA	5.14	6.12	1.07	NA	NA	13.75	14.73	090
26255		A	Extensive hand surgery	12.71	NA	NA	8.22	9.11	1.68	NA	NA	22.61	23.50	090
26260		A	Extensive finger surgery	7.02	NA	NA	5.27	5.97	1.01	NA	NA	13.30	14.00	090
26261		A	Extensive finger surgery	9.20	NA	NA	6.74	6.33	1.14	NA	NA	17.08	16.67	090
26262		A	Partial removal of finger	5.66	NA	NA	4.58	5.16	0.88	NA	NA	11.12	11.70	090
26320		A	Removal of implant from hand	3.97	NA	NA	3.71	4.17	0.59	NA	NA	8.27	8.73	090
26340		A	Manipulate finger w/anesth	2.50	NA	NA	4.54	4.80	0.39	NA	NA	7.43	7.69	090
26350		A	Repair finger/hand tendon	5.98	NA	NA	9.32	13.32	0.93	NA	NA	16.23	20.23	090
26352		A	Repair/graft hand tendon	7.67	NA	NA	9.89	14.02	1.13	NA	NA	18.69	22.82	090
26356		A	Repair finger/hand tendon	10.06	NA	NA	13.47	17.18	1.21	NA	NA	24.74	28.45	090
26357		A	Repair finger/hand tendon	8.57	NA	NA	10.13	14.29	1.33	NA	NA	20.03	24.19	090
26358		A	Repair/graft hand tendon	9.13	NA	NA	10.64	15.18	1.38	NA	NA	21.15	25.69	090
26370		A	Repair finger/hand tendon	7.10	NA	NA	9.36	13.70	1.12	NA	NA	17.58	21.92	090
26372		A	Repair/graft hand tendon	8.81	NA	NA	10.32	15.02	1.40	NA	NA	20.53	25.23	090
26373		A	Repair finger/hand tendon	8.21	NA	NA	10.01	14.57	1.23	NA	NA	19.45	24.01	090
26390		A	Revise hand/finger tendon	9.24	NA	NA	8.93	12.22	1.40	NA	NA	19.57	22.86	090
26392		A	Repair/graft hand tendon	10.30	NA	NA	10.84	15.29	1.57	NA	NA	22.71	27.16	090
26410		A	Repair hand tendon	4.62	NA	NA	7.46	10.84	0.73	NA	NA	12.81	16.19	090
26412		A	Repair/graft hand tendon	6.30	NA	NA	8.45	12.10	0.97	NA	NA	15.72	19.37	090
26415		A	Excision, hand/finger tendon	8.33	NA	NA	6.64	10.52	0.98	NA	NA	15.95	19.83	090
26416		A	Graft hand or finger tendon	9.36	NA	NA	8.62	13.13	0.79	NA	NA	18.77	23.28	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
26418		A	Repair finger tendon	4.24	NA	NA	7.97	11.26	0.67	NA	NA	12.88	16.17	090
26420		A	Repair/graft finger tendon	6.76	NA	NA	8.61	12.41	1.07	NA	NA	16.44	20.24	090
26426		A	Repair finger/hand tendon	6.14	NA	NA	8.40	12.00	0.95	NA	NA	15.49	19.09	090
26428		A	Repair/graft finger tendon	7.20	NA	NA	9.05	12.69	1.09	NA	NA	17.34	20.98	090
26432		A	Repair finger tendon	4.01	NA	NA	6.62	9.37	0.64	NA	NA	11.27	14.02	090
26433		A	Repair finger tendon	4.55	NA	NA	6.83	9.82	0.72	NA	NA	12.10	15.09	090
26434		A	Repair/graft finger tendon	6.08	NA	NA	7.75	10.62	0.93	NA	NA	14.76	17.63	090
26437		A	Realignment of tendons	5.81	NA	NA	7.61	10.60	0.89	NA	NA	14.31	17.30	090
26440		A	Release palm/finger tendon	5.01	NA	NA	8.32	12.18	0.75	NA	NA	14.08	17.94	090
26442		A	Release palm & finger tendon	9.40	NA	NA	11.44	14.85	1.20	NA	NA	22.04	25.45	090
26445		A	Release hand/finger tendon	4.30	NA	NA	8.00	11.89	0.65	NA	NA	12.95	16.84	090
26449		A	Release forearm/hand tendon	8.24	NA	NA	11.14	14.65	1.06	NA	NA	20.44	23.95	090
26450		A	Incision of palm tendon	3.66	NA	NA	5.04	6.77	0.59	NA	NA	9.29	11.02	090
26455		A	Incision of finger tendon	3.63	NA	NA	4.99	6.72	0.58	NA	NA	9.20	10.93	090
26460		A	Incise hand/finger tendon	3.45	NA	NA	4.94	6.61	0.55	NA	NA	8.94	10.61	090
26471		A	Fusion of finger tendons	5.72	NA	NA	7.55	10.34	0.88	NA	NA	14.15	16.94	090
26474		A	Fusion of finger tendons	5.31	NA	NA	7.38	10.41	0.76	NA	NA	13.45	16.48	090
26476		A	Tendon lengthening	5.17	NA	NA	7.29	10.04	0.79	NA	NA	13.25	16.00	090
26477		A	Tendon shortening	5.14	NA	NA	7.37	10.16	0.81	NA	NA	13.32	16.11	090
26478		A	Lengthening of hand tendon	5.79	NA	NA	7.56	10.79	0.90	NA	NA	14.25	17.48	090
26479		A	Shortening of hand tendon	5.73	NA	NA	7.54	10.58	0.92	NA	NA	14.19	17.23	090
26480		A	Transplant hand tendon	6.68	NA	NA	9.44	13.67	1.02	NA	NA	17.14	21.37	090
26483		A	Transplant/graft hand tendon	8.28	NA	NA	10.07	14.17	1.26	NA	NA	19.61	23.71	090
26485		A	Transplant palm tendon	7.69	NA	NA	9.79	14.00	1.15	NA	NA	18.63	22.84	090
26489		A	Transplant/graft palm tendon	9.66	NA	NA	10.13	11.60	1.26	NA	NA	21.05	22.52	090
26490		A	Revise thumb tendon	8.40	NA	NA	8.75	11.83	1.21	NA	NA	18.36	21.44	090
26492		A	Tendon transfer with graft	9.61	NA	NA	9.61	12.63	1.40	NA	NA	20.62	23.64	090
26494		A	Hand tendon/muscle transfer	8.46	NA	NA	8.87	11.98	1.28	NA	NA	18.61	21.72	090
26496		A	Revise thumb tendon	9.58	NA	NA	9.30	12.28	1.45	NA	NA	20.33	23.31	090
26497		A	Finger tendon transfer	9.56	NA	NA	9.27	12.53	1.41	NA	NA	20.24	23.50	090
26498		A	Finger tendon transfer	13.98	NA	NA	11.28	14.98	2.10	NA	NA	27.36	31.06	090
26499		A	Revision of finger	8.97	NA	NA	8.61	11.96	1.35	NA	NA	18.93	22.28	090
26500		A	Hand tendon reconstruction	5.95	NA	NA	7.62	10.51	0.90	NA	NA	14.47	17.36	090
26502		A	Hand tendon reconstruction	7.13	NA	NA	8.20	11.09	1.13	NA	NA	16.46	19.35	090
26504		A	Hand tendon reconstruction	7.46	NA	NA	8.46	11.58	1.24	NA	NA	17.16	20.28	090
26508		A	Release thumb contracture	6.00	NA	NA	7.64	10.69	0.98	NA	NA	14.62	17.67	090
26510		A	Thumb tendon transfer	5.42	NA	NA	7.46	10.39	0.79	NA	NA	13.67	16.60	090
26516		A	Fusion of knuckle joint	7.14	NA	NA	8.11	11.23	1.10	NA	NA	16.35	19.47	090
26517		A	Fusion of knuckle joints	8.88	NA	NA	9.07	12.42	1.41	NA	NA	19.36	22.71	090
26518		A	Fusion of knuckle joints	9.07	NA	NA	9.09	12.35	1.35	NA	NA	19.51	22.77	090
26520		A	Release knuckle contracture	5.29	NA	NA	8.69	12.62	0.80	NA	NA	14.78	18.71	090
26525		A	Release finger contracture	5.32	NA	NA	8.70	12.68	0.81	NA	NA	14.83	18.81	090
26530		A	Revise knuckle joint	6.68	NA	NA	5.33	5.95	1.04	NA	NA	13.05	13.67	090
26531		A	Revise knuckle with implant	7.90	NA	NA	6.05	6.87	1.17	NA	NA	15.12	15.94	090
26535		A	Revise finger joint	5.23	NA	NA	3.97	3.81	0.71	NA	NA	9.91	9.75	090
26536		A	Revise/implant finger joint	6.36	NA	NA	9.02	9.52	0.96	NA	NA	16.34	16.84	090
26540		A	Repair hand joint	6.42	NA	NA	7.86	10.89	0.99	NA	NA	15.27	18.30	090
26541		A	Repair hand joint with graft	8.61	NA	NA	8.90	12.30	1.28	NA	NA	18.79	22.19	090
26542		A	Repair hand joint with graft	6.77	NA	NA	8.01	11.05	1.02	NA	NA	15.80	18.84	090
26545		A	Reconstruct finger joint	6.91	NA	NA	8.19	11.18	1.05	NA	NA	16.15	19.14	090
26546		A	Repair nonunion hand	10.41	NA	NA	11.25	14.12	1.44	NA	NA	23.10	25.97	090
26548		A	Reconstruct finger joint	8.02	NA	NA	8.66	11.83	1.20	NA	NA	17.88	21.05	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
26550		A	Construct thumb replacement	21.46	NA	NA	15.12	17.00	2.45	NA	NA	39.03	40.91	090
26551		A	Great toe-hand transfer	48.09	NA	NA	21.34	29.73	7.96	NA	NA	77.39	85.78	090
26553		A	Single transfer, toe-hand	47.78	NA	NA	19.85	22.03	2.41	NA	NA	70.04	72.22	090
26554		A	Double transfer, toe-hand	56.57	NA	NA	19.02	32.99	9.41	NA	NA	85.00	98.97	090
26555		A	Positional change of finger	16.86	NA	NA	13.64	17.08	2.48	NA	NA	32.98	36.42	090
26556		A	Toe joint transfer	49.27	NA	NA	17.66	29.48	2.57	NA	NA	69.50	81.32	090
26560		A	Repair of web finger	5.37	NA	NA	7.00	9.12	0.85	NA	NA	13.22	15.34	090
26561		A	Repair of web finger	10.90	NA	NA	9.09	11.56	1.45	NA	NA	21.44	23.91	090
26562		A	Repair of web finger	16.30	NA	NA	13.61	16.30	2.23	NA	NA	32.14	34.83	090
26565		A	Correct metacarpal flaw	6.73	NA	NA	7.79	10.98	1.00	NA	NA	15.52	18.71	090
26567		A	Correct finger deformity	6.81	NA	NA	8.02	10.99	1.04	NA	NA	15.87	18.84	090
26568		A	Lengthen metacarpal/finger	9.07	NA	NA	9.99	14.10	1.49	NA	NA	20.55	24.66	090
26580		A	Repair hand deformity	19.40	NA	NA	11.48	13.13	2.28	NA	NA	33.16	34.81	090
26587		A	Reconstruct extra finger	14.28	NA	NA	8.28	9.00	1.53	NA	NA	24.09	24.81	090
26590		A	Repair finger deformity	18.43	NA	NA	10.51	13.11	2.77	NA	NA	31.71	34.31	090
26591		A	Repair muscles of hand	3.25	NA	NA	6.09	8.76	0.48	NA	NA	9.82	12.49	090
26593		A	Release muscles of hand	5.30	NA	NA	7.63	10.28	0.78	NA	NA	13.71	16.36	090
26596		A	Excision constricting tissue	8.94	NA	NA	7.35	8.48	1.43	NA	NA	17.72	18.85	090
26600		A	Treat metacarpal fracture	2.40	3.35	3.55	3.01	2.75	0.30	6.05	6.25	5.71	5.45	090
26605		A	Treat metacarpal fracture	2.85	4.03	4.44	3.45	3.61	0.49	7.37	7.78	6.79	6.95	090
26607		A	Treat metacarpal fracture	5.35	NA	NA	4.80	5.92	0.87	NA	NA	11.02	12.14	090
26608		A	Treat metacarpal fracture	5.35	NA	NA	5.16	5.99	0.88	NA	NA	11.39	12.22	090
26615		A	Treat metacarpal fracture	5.32	NA	NA	4.49	5.11	0.86	NA	NA	10.67	11.29	090
26641		A	Treat thumb dislocation	3.93	4.14	4.47	3.49	3.53	0.39	8.46	8.79	7.81	7.85	090
26645		A	Treat thumb fracture	4.40	4.56	5.03	3.87	4.12	0.67	9.63	10.10	8.94	9.19	090
26650		A	Treat thumb fracture	5.71	NA	NA	5.53	6.42	0.94	NA	NA	12.18	13.07	090
26665		A	Treat thumb fracture	7.65	NA	NA	5.59	6.37	0.90	NA	NA	14.14	14.92	090
26670		A	Treat hand dislocation	3.68	3.51	4.08	2.92	2.94	0.39	7.58	8.15	6.99	7.01	090
26675		A	Treat hand dislocation	4.63	4.79	5.32	4.10	4.39	0.77	10.19	10.72	9.50	9.79	090
26676		A	Pin hand dislocation	5.51	NA	NA	5.48	6.40	0.91	NA	NA	11.90	12.82	090
26685		A	Treat hand dislocation	7.03	NA	NA	5.16	5.91	1.09	NA	NA	13.28	14.03	090
26686		A	Treat hand dislocation	7.99	NA	NA	5.83	6.65	1.24	NA	NA	15.06	15.88	090
26700		A	Treat knuckle dislocation	3.68	3.29	3.65	2.92	2.88	0.35	7.32	7.68	6.95	6.91	090
26705		A	Treat knuckle dislocation	4.18	4.74	5.20	4.03	4.24	0.66	9.58	10.04	8.87	9.08	090
26706		A	Pin knuckle dislocation	5.11	NA	NA	4.62	4.98	0.81	NA	NA	10.54	10.90	090
26715		A	Treat knuckle dislocation	5.73	NA	NA	4.66	5.31	0.91	NA	NA	11.30	11.95	090
26720		A	Treat finger fracture, each	1.66	2.55	2.73	2.28	2.12	0.24	4.45	4.63	4.18	4.02	090
26725		A	Treat finger fracture, each	3.33	4.04	4.60	3.37	3.48	0.53	7.90	8.46	7.23	7.34	090
26727		A	Treat finger fracture, each	5.22	NA	NA	5.12	5.97	0.84	NA	NA	11.18	12.03	090
26735		A	Treat finger fracture, each	5.97	NA	NA	4.74	5.36	0.95	NA	NA	11.66	12.28	090
26740		A	Treat finger fracture, each	1.94	2.91	3.08	2.62	2.69	0.31	5.16	5.33	4.87	4.94	090
26742		A	Treat finger fracture, each	3.84	4.27	4.82	3.56	3.81	0.58	8.69	9.24	7.98	8.23	090
26746		A	Treat finger fracture, each	5.80	NA	NA	4.70	5.36	0.91	NA	NA	11.41	12.07	090
26750		A	Treat finger fracture, each	1.70	2.22	2.42	2.23	2.07	0.22	4.14	4.34	4.15	3.99	090
26755		A	Treat finger fracture, each	3.10	3.74	4.26	2.93	2.99	0.42	7.26	7.78	6.45	6.51	090
26756		A	Pin finger fracture, each	4.38	NA	NA	4.78	5.50	0.71	NA	NA	9.87	10.59	090
26765		A	Treat finger fracture, each	4.16	NA	NA	3.77	4.24	0.66	NA	NA	8.59	9.06	090
26770		A	Treat finger dislocation	3.02	2.88	3.30	2.50	2.44	0.27	6.17	6.59	5.79	5.73	090
26775		A	Treat finger dislocation	3.70	4.49	5.03	3.76	3.81	0.54	8.73	9.27	8.00	8.05	090
26776		A	Pin finger dislocation	4.79	NA	NA	4.94	5.75	0.77	NA	NA	10.50	11.31	090
26785		A	Treat finger dislocation	4.20	NA	NA	3.84	4.37	0.68	NA	NA	8.72	9.25	090
26820		A	Thumb fusion with graft	8.25	NA	NA	8.56	12.11	1.30	NA	NA	18.11	21.66	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
26841		A	Fusion of thumb	7.12	NA	NA	8.56	12.09	1.18	NA	NA	16.86	20.39	090
26842		A	Thumb fusion with graft	8.29	NA	NA	8.81	12.26	1.32	NA	NA	18.42	21.87	090
26843		A	Fusion of hand joint	7.60	NA	NA	8.05	11.31	1.15	NA	NA	16.80	20.06	090
26844		A	Fusion/graft of hand joint	8.78	NA	NA	9.00	12.30	1.33	NA	NA	19.11	22.41	090
26850		A	Fusion of knuckle	6.96	NA	NA	8.07	11.20	1.06	NA	NA	16.09	19.22	090
26852		A	Fusion of knuckle with graft	8.51	NA	NA	8.89	11.92	1.22	NA	NA	18.62	21.65	090
26860		A	Fusion of finger joint	4.68	NA	NA	7.34	10.25	0.73	NA	NA	12.75	15.66	090
26861		A	Fusion of finger jnt, add-on	1.74	NA	NA	0.69	0.87	0.27	NA	NA	2.70	2.88	ZZZ
26862		A	Fusion/graft of finger joint	7.36	NA	NA	8.45	11.40	1.10	NA	NA	16.91	19.86	090
26863		A	Fuse/graft added joint	3.89	NA	NA	1.54	1.98	0.56	NA	NA	5.99	6.43	ZZZ
26910		A	Amputate metacarpal bone	7.59	NA	NA	8.09	10.46	1.16	NA	NA	16.84	19.21	090
26951		A	Amputation of finger/thumb	5.75	NA	NA	7.34	9.47	0.71	NA	NA	13.80	15.93	090
26952		A	Amputation of finger/thumb	6.30	NA	NA	7.72	10.70	0.95	NA	NA	14.97	17.95	090
26990		A	Drainage of pelvis lesion	7.77	NA	NA	6.03	6.93	1.22	NA	NA	15.02	15.92	090
26991		A	Drainage of pelvis bursa	6.91	8.49	10.52	4.77	5.28	1.11	16.51	18.54	12.79	13.30	090
26992		A	Drainage of bone lesion	13.30	NA	NA	8.29	9.88	2.16	NA	NA	23.75	25.34	090
27000		A	Incision of hip tendon	5.61	NA	NA	4.46	5.09	0.98	NA	NA	11.05	11.68	090
27001		A	Incision of hip tendon	6.99	NA	NA	5.12	5.86	1.24	NA	NA	13.35	14.09	090
27003		A	Incision of hip tendon	7.63	NA	NA	5.70	6.30	1.12	NA	NA	14.45	15.05	090
27005		A	Incision of hip tendon	9.89	NA	NA	6.67	7.55	1.72	NA	NA	18.28	19.16	090
27006		A	Incision of hip tendons	9.91	NA	NA	6.69	7.67	1.69	NA	NA	18.29	19.27	090
27025		A	Incision of hip/thigh fascia	12.56	NA	NA	7.97	8.42	1.84	NA	NA	22.37	22.82	090
27030		A	Drainage of hip joint	13.47	NA	NA	7.92	9.23	2.26	NA	NA	23.65	24.96	090
27033		A	Exploration of hip joint	13.91	NA	NA	8.27	9.53	2.32	NA	NA	24.50	25.76	090
27035		A	Denervation of hip joint	17.14	NA	NA	9.30	10.77	2.15	NA	NA	28.59	30.06	090
27036		A	Excision of hip joint/muscle	14.10	NA	NA	8.84	9.73	2.26	NA	NA	25.20	26.09	090
27040		A	Biopsy of soft tissues	2.87	5.23	5.25	1.85	1.98	0.27	8.37	8.39	4.99	5.12	010
27041		A	Biopsy of soft tissues	10.00	NA	NA	5.81	6.45	1.35	NA	NA	17.16	17.80	090
27047		A	Remove hip/pelvis lesion	7.44	7.06	7.11	4.51	4.71	1.03	15.53	15.58	12.98	13.18	090
27048		A	Remove hip/pelvis lesion	6.36	NA	NA	4.57	4.75	0.92	NA	NA	11.85	12.03	090
27049		A	Remove tumor, hip/pelvis	15.12	NA	NA	8.10	8.34	2.06	NA	NA	25.28	25.52	090
27050		A	Biopsy of sacroiliac joint	4.59	NA	NA	3.81	4.28	0.60	NA	NA	9.00	9.47	090
27052		A	Biopsy of hip joint	7.21	NA	NA	5.57	5.82	1.08	NA	NA	13.86	14.11	090
27054		A	Removal of hip joint lining	9.01	NA	NA	6.35	7.11	1.47	NA	NA	16.83	17.59	090
27060		A	Removal of ischial bursa	5.72	NA	NA	4.31	4.36	0.80	NA	NA	10.83	10.88	090
27062		A	Remove femur lesion/bursa	5.60	NA	NA	4.53	5.04	0.93	NA	NA	11.06	11.57	090
27065		A	Removal of hip bone lesion	6.37	NA	NA	5.03	5.35	1.01	NA	NA	12.41	12.73	090
27066		A	Removal of hip bone lesion	10.97	NA	NA	7.30	8.17	1.79	NA	NA	20.06	20.93	090
27067		A	Remove/graft hip bone lesion	14.47	NA	NA	8.66	10.18	1.84	NA	NA	24.97	26.49	090
27070		A	Partial removal of hip bone	11.36	NA	NA	7.62	8.78	1.74	NA	NA	20.72	21.88	090
27071		A	Partial removal of hip bone	12.16	NA	NA	8.21	9.67	1.92	NA	NA	22.29	23.75	090
27075		A	Extensive hip surgery	36.71	NA	NA	16.24	18.51	5.64	NA	NA	58.59	60.86	090
27076		A	Extensive hip surgery	24.17	NA	NA	12.43	14.02	3.70	NA	NA	40.30	41.89	090
27077		A	Extensive hip surgery	42.48	NA	NA	19.47	21.92	6.12	NA	NA	68.07	70.52	090
27078		A	Extensive hip surgery	14.44	NA	NA	8.56	9.62	2.22	NA	NA	25.22	26.28	090
27079		A	Extensive hip surgery	14.81	NA	NA	7.40	9.03	1.94	NA	NA	24.15	25.78	090
27080		A	Removal of tail bone	6.74	NA	NA	4.64	4.79	0.93	NA	NA	12.31	12.46	090
27086		A	Remove hip foreign body	1.87	3.78	4.37	1.53	1.76	0.25	5.90	6.49	3.65	3.88	010
27087		A	Remove hip foreign body	8.65	NA	NA	5.56	6.40	1.35	NA	NA	15.56	16.40	090
27090		A	Removal of hip prosthesis	11.49	NA	NA	7.30	8.43	1.94	NA	NA	20.73	21.86	090
27091		A	Removal of hip prosthesis	24.07	NA	NA	12.76	13.71	3.84	NA	NA	40.67	41.62	090
27093		A	Injection for hip x-ray	1.30	3.15	4.14	0.46	0.48	0.13	4.58	5.57	1.89	1.91	000

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
27095		A	Injection for hip x-ray	1.50	3.78	5.25	0.51	0.52	0.14	5.42	6.89	2.15	2.16	000
27096		A	Inject sacroiliac joint	1.40	2.53	3.90	0.33	0.33	0.08	4.01	5.38	1.81	1.81	000
27097		A	Revision of hip tendon	9.09	NA	NA	6.23	6.38	1.57	NA	NA	16.89	17.04	090
27098		A	Transfer tendon to pelvis	9.12	NA	NA	4.73	6.46	0.95	NA	NA	14.80	16.53	090
27100		A	Transfer of abdominal muscle	11.12	NA	NA	7.24	8.33	1.85	NA	NA	20.21	21.30	090
27105		A	Transfer of spinal muscle	11.81	NA	NA	7.77	8.84	1.72	NA	NA	21.30	22.37	090
27110		A	Transfer of iliopsoas muscle	13.54	NA	NA	8.45	8.97	2.18	NA	NA	24.17	24.69	090
27111		A	Transfer of iliopsoas muscle	12.37	NA	NA	7.98	8.87	1.94	NA	NA	22.29	23.18	090
27120		A	Reconstruction of hip socket	19.00	NA	NA	10.57	11.55	3.08	NA	NA	32.65	33.63	090
27122		A	Reconstruction of hip socket	15.86	NA	NA	9.29	10.63	2.61	NA	NA	27.76	29.10	090
27125		A	Partial hip replacement	16.38	NA	NA	9.49	10.36	2.54	NA	NA	28.41	29.28	090
27130		A	Total hip arthroplasty	17.40	NA	NA	9.46	12.37	3.50	NA	NA	30.36	33.27	090
27132		A	Total hip arthroplasty	25.41	NA	NA	13.28	15.08	4.04	NA	NA	42.73	44.53	090
27134		A	Revise hip joint replacement	30.07	NA	NA	14.52	17.01	4.94	NA	NA	49.53	52.02	090
27137		A	Revise hip joint replacement	22.49	NA	NA	11.59	13.38	3.67	NA	NA	37.75	39.54	090
27138		A	Revise hip joint replacement	23.49	NA	NA	11.97	13.82	3.84	NA	NA	39.30	41.15	090
27140		A	Transplant femur ridge	12.58	NA	NA	7.67	9.00	2.11	NA	NA	22.36	23.69	090
27146		A	Incision of hip bone	18.64	NA	NA	10.51	11.76	2.96	NA	NA	32.11	33.36	090
27147		A	Revision of hip bone	21.79	NA	NA	11.73	12.90	3.57	NA	NA	37.09	38.26	090
27151		A	Incision of hip bones	23.84	NA	NA	12.10	9.00	3.91	NA	NA	39.85	36.75	090
27156		A	Revision of hip bones	25.95	NA	NA	13.23	15.39	4.21	NA	NA	43.39	45.55	090
27158		A	Revision of pelvis	20.79	NA	NA	6.99	10.00	3.16	NA	NA	30.94	33.95	090
27161		A	Incision of neck of femur	17.64	NA	NA	10.20	11.66	2.94	NA	NA	30.78	32.24	090
27165		A	Incision/fixation of femur	19.96	NA	NA	11.48	12.58	3.10	NA	NA	34.54	35.64	090
27170		A	Repair/graft femur head/neck	17.40	NA	NA	9.61	10.90	2.81	NA	NA	29.82	31.11	090
27175		A	Treat slipped epiphysis	9.23	NA	NA	5.69	6.44	1.46	NA	NA	16.38	17.13	090
27176		A	Treat slipped epiphysis	12.69	NA	NA	8.10	8.81	2.22	NA	NA	23.01	23.72	090
27177		A	Treat slipped epiphysis	15.84	NA	NA	9.50	10.57	2.61	NA	NA	27.95	29.02	090
27178		A	Treat slipped epiphysis	12.69	NA	NA	8.10	8.36	2.08	NA	NA	22.87	23.13	090
27179		A	Revise head/neck of femur	13.74	NA	NA	8.38	9.61	2.25	NA	NA	24.37	25.60	090
27181		A	Treat slipped epiphysis	15.90	NA	NA	9.63	10.08	1.57	NA	NA	27.10	27.55	090
27185		A	Revision of femur epiphysis	9.59	NA	NA	6.56	7.30	2.39	NA	NA	18.54	19.28	090
27187		A	Reinforce hip bones	14.00	NA	NA	8.55	9.90	2.37	NA	NA	24.92	26.27	090
27193		A	Treat pelvic ring fracture	5.92	4.56	4.97	4.70	5.00	0.96	11.44	11.85	11.58	11.88	090
27194		A	Treat pelvic ring fracture	10.00	NA	NA	6.48	7.37	1.65	NA	NA	18.13	19.02	090
27200		A	Treat tail bone fracture	1.84	2.05	2.19	2.20	2.17	0.28	4.17	4.31	4.32	4.29	090
27202		A	Treat tail bone fracture	7.21	NA	NA	11.31	15.51	1.06	NA	NA	19.58	23.78	090
27215		A	Treat pelvic fracture(s)	10.39	NA	NA	6.41	6.93	1.97	NA	NA	18.77	19.29	090
27216		A	Treat pelvic ring fracture	15.65	NA	NA	9.05	9.48	2.63	NA	NA	27.33	27.76	090
27217		A	Treat pelvic ring fracture	14.57	NA	NA	8.52	9.76	2.41	NA	NA	25.50	26.74	090
27218		A	Treat pelvic ring fracture	20.85	NA	NA	11.15	11.36	3.48	NA	NA	35.48	35.69	090
27220		A	Treat hip socket fracture	6.65	5.18	5.60	5.09	5.51	1.07	12.90	13.32	12.81	13.23	090
27222		A	Treat hip socket fracture	13.88	NA	NA	8.35	9.59	2.19	NA	NA	24.42	25.66	090
27226		A	Treat hip wall fracture	15.37	NA	NA	8.81	8.08	2.48	NA	NA	26.66	25.93	090
27227		A	Treat hip fracture(s)	25.13	NA	NA	13.14	14.87	4.05	NA	NA	42.32	44.05	090
27228		A	Treat hip fracture(s)	29.05	NA	NA	14.69	16.93	4.66	NA	NA	48.40	50.64	090
27230		A	Treat thigh fracture	5.61	4.90	5.37	4.83	5.04	0.95	11.46	11.93	11.39	11.60	090
27232		A	Treat thigh fracture	11.62	NA	NA	5.90	6.87	1.85	NA	NA	19.37	20.34	090
27235		A	Treat thigh fracture	12.80	NA	NA	7.89	9.08	2.11	NA	NA	22.80	23.99	090
27236		A	Treat thigh fracture	14.54	NA	NA	8.53	10.44	2.71	NA	NA	25.78	27.69	090
27238		A	Treat thigh fracture	5.57	NA	NA	4.61	5.02	0.89	NA	NA	11.07	11.48	090
27240		A	Treat thigh fracture	13.56	NA	NA	7.96	9.12	2.16	NA	NA	23.68	24.84	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
27244		A	Treat thigh fracture	17.00	NA	NA	9.50	10.87	2.77	NA	NA	29.27	30.64	090
27245		A	Treat thigh fracture	21.01	NA	NA	11.21	13.14	3.52	NA	NA	35.74	37.67	090
27246		A	Treat thigh fracture	4.70	3.87	4.32	3.90	4.30	0.81	9.38	9.83	9.41	9.81	090
27248		A	Treat thigh fracture	10.73	NA	NA	6.87	7.89	1.81	NA	NA	19.41	20.43	090
27250		A	Treat hip dislocation	7.12	NA	NA	4.22	4.53	0.62	NA	NA	11.96	12.27	090
27252		A	Treat hip dislocation	10.85	NA	NA	6.37	7.18	1.66	NA	NA	18.88	19.69	090
27253		A	Treat hip dislocation	13.38	NA	NA	7.71	9.29	2.24	NA	NA	23.33	24.91	090
27254		A	Treat hip dislocation	18.71	NA	NA	10.34	11.62	3.17	NA	NA	32.22	33.50	090
27256		A	Treat hip dislocation	4.23	2.40	3.25	1.38	1.91	0.46	7.09	7.94	6.07	6.60	010
27257		A	Treat hip dislocation	5.33	NA	NA	2.48	2.74	0.69	NA	NA	8.50	8.76	010
27258		A	Treat hip dislocation	15.95	NA	NA	9.26	10.49	2.64	NA	NA	27.85	29.08	090
27259		A	Treat hip dislocation	22.95	NA	NA	12.64	13.78	3.74	NA	NA	39.33	40.47	090
27265		A	Treat hip dislocation	5.04	NA	NA	3.93	4.58	0.63	NA	NA	9.60	10.25	090
27266		A	Treat hip dislocation	7.60	NA	NA	5.45	6.13	1.29	NA	NA	14.34	15.02	090
27275		A	Manipulation of hip joint	2.27	NA	NA	1.86	2.05	0.39	NA	NA	4.52	4.71	010
27280		A	Fusion of sacroiliac joint	14.39	NA	NA	8.87	9.94	2.53	NA	NA	25.79	26.86	090
27282		A	Fusion of pubic bones	11.62	NA	NA	7.69	7.94	1.86	NA	NA	21.17	21.42	090
27284		A	Fusion of hip joint	24.85	NA	NA	12.57	14.24	3.92	NA	NA	41.34	43.01	090
27286		A	Fusion of hip joint	24.89	NA	NA	13.18	15.18	3.12	NA	NA	41.19	43.19	090
27290		A	Amputation of leg at hip	24.27	NA	NA	12.25	13.64	3.43	NA	NA	39.95	41.34	090
27295		A	Amputation of leg at hip	19.46	NA	NA	9.61	10.91	2.95	NA	NA	32.02	33.32	090
27301		A	Drain thigh/knee lesion	6.60	8.17	9.62	4.61	5.02	1.04	15.81	17.26	12.25	12.66	090
27303		A	Drainage of bone lesion	8.45	NA	NA	5.96	6.74	1.43	NA	NA	15.84	16.62	090
27305		A	Incise thigh tendon & fascia	6.03	NA	NA	4.58	5.05	1.01	NA	NA	11.62	12.09	090
27306		A	Incision of thigh tendon	4.61	NA	NA	4.01	4.55	0.85	NA	NA	9.47	10.01	090
27307		A	Incision of thigh tendons	5.91	NA	NA	4.73	5.23	1.04	NA	NA	11.68	12.18	090
27310		A	Exploration of knee joint	9.80	NA	NA	6.59	7.35	1.61	NA	NA	18.00	18.76	090
27315		A	Partial removal, thigh nerve	7.02	NA	NA	5.20	5.02	1.09	NA	NA	13.31	13.13	090
27320		A	Partial removal, thigh nerve	6.29	NA	NA	4.54	5.07	1.06	NA	NA	11.89	12.42	090
27323		A	Biopsy, thigh soft tissues	2.28	4.11	3.67	1.88	1.89	0.24	6.63	6.19	4.40	4.41	010
27324		A	Biopsy, thigh soft tissues	4.89	NA	NA	3.79	4.09	0.75	NA	NA	9.43	9.73	090
27327		A	Removal of thigh lesion	4.46	6.04	6.02	3.57	3.69	0.64	11.14	11.12	8.67	8.79	090
27328		A	Removal of thigh lesion	5.56	NA	NA	4.00	4.29	0.84	NA	NA	10.40	10.69	090
27329		A	Remove tumor, thigh/knee	15.60	NA	NA	8.40	8.89	2.14	NA	NA	26.14	26.63	090
27330		A	Biopsy, knee joint lining	4.96	NA	NA	4.00	4.44	0.86	NA	NA	9.82	10.26	090
27331		A	Explore/treat knee joint	5.87	NA	NA	4.73	5.34	1.02	NA	NA	11.62	12.23	090
27332		A	Removal of knee cartilage	8.26	NA	NA	6.01	6.86	1.43	NA	NA	15.70	16.55	090
27333		A	Removal of knee cartilage	7.35	NA	NA	5.61	6.42	1.26	NA	NA	14.22	15.03	090
27334		A	Remove knee joint lining	8.99	NA	NA	6.34	7.16	1.51	NA	NA	16.84	17.66	090
27335		A	Remove knee joint lining	10.35	NA	NA	6.90	7.91	1.74	NA	NA	18.99	20.00	090
27340		A	Removal of kneecap bursa	4.17	NA	NA	3.96	4.42	0.72	NA	NA	8.85	9.31	090
27345		A	Removal of knee cyst	5.91	NA	NA	4.79	5.43	1.00	NA	NA	11.70	12.34	090
27347		A	Remove knee cyst	6.52	NA	NA	5.14	5.37	0.98	NA	NA	12.64	12.87	090
27350		A	Removal of kneecap	8.46	NA	NA	6.15	6.98	1.41	NA	NA	16.02	16.85	090
27355		A	Remove femur lesion	7.82	NA	NA	5.74	6.53	1.32	NA	NA	14.88	15.67	090
27356		A	Remove femur lesion/graft	9.89	NA	NA	6.71	7.58	1.65	NA	NA	18.25	19.12	090
27357		A	Remove femur lesion/graft	10.93	NA	NA	7.38	8.39	1.95	NA	NA	20.26	21.27	090
27358		A	Remove femur lesion/fixation	4.73	NA	NA	1.85	2.36	0.82	NA	NA	7.40	7.91	ZZZ
27360		A	Partial removal, leg bone(s)	11.26	NA	NA	7.80	9.14	1.83	NA	NA	20.89	22.23	090
27365		A	Extensive leg surgery	17.85	NA	NA	10.27	11.35	2.79	NA	NA	30.91	31.99	090
27370		A	Injection for knee x-ray	0.96	2.85	3.51	0.33	0.32	0.08	3.89	4.55	1.37	1.36	000
27372		A	Removal of foreign body	5.06	8.27	9.63	4.00	4.53	0.84	14.17	15.53	9.90	10.43	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
27380		A	Repair of kneecap tendon	7.27	NA	NA	5.83	6.93	1.24	NA	NA	14.34	15.44	090
27381		A	Repair/graft kneecap tendon	10.56	NA	NA	7.28	8.66	1.79	NA	NA	19.63	21.01	090
27385		A	Repair of thigh muscle	7.93	NA	NA	6.10	7.26	1.36	NA	NA	15.39	16.55	090
27386		A	Repair/graft of thigh muscle	10.90	NA	NA	7.69	9.08	1.85	NA	NA	20.44	21.83	090
27390		A	Incision of thigh tendon	5.38	NA	NA	4.52	4.97	0.92	NA	NA	10.82	11.27	090
27391		A	Incision of thigh tendons	7.31	NA	NA	5.42	6.29	1.23	NA	NA	13.96	14.83	090
27392		A	Incision of thigh tendons	9.43	NA	NA	6.59	7.36	1.57	NA	NA	17.59	18.36	090
27393		A	Lengthening of thigh tendon	6.44	NA	NA	4.95	5.63	1.10	NA	NA	12.49	13.17	090
27394		A	Lengthening of thigh tendons	8.61	NA	NA	6.08	6.95	1.47	NA	NA	16.16	17.03	090
27395		A	Lengthening of thigh tendons	12.01	NA	NA	7.83	8.97	2.04	NA	NA	21.88	23.02	090
27396		A	Transplant of thigh tendon	7.97	NA	NA	5.82	6.72	1.34	NA	NA	15.13	16.03	090
27397		A	Transplants of thigh tendons	12.38	NA	NA	8.25	8.87	1.82	NA	NA	22.45	23.07	090
27400		A	Revise thigh muscles/tendons	9.13	NA	NA	6.10	6.98	1.31	NA	NA	16.54	17.42	090
27403		A	Repair of knee cartilage	8.44	NA	NA	5.97	6.89	1.44	NA	NA	15.85	16.77	090
27405		A	Repair of knee ligament	8.88	NA	NA	6.33	7.22	1.51	NA	NA	16.72	17.61	090
27407		A	Repair of knee ligament	10.62	NA	NA	6.55	7.89	1.78	NA	NA	18.95	20.29	090
27409		A	Repair of knee ligaments	13.48	NA	NA	8.27	9.55	2.24	NA	NA	23.99	25.27	090
27412		A	Autochondrocyte implant knee	24.43	NA	NA	13.45	14.49	4.35	NA	NA	42.23	43.27	090
27415		A	Osteochondral knee allograft	19.69	NA	NA	11.62	12.35	4.35	NA	NA	35.66	36.39	090
27418		A	Repair degenerated kneecap	11.37	NA	NA	7.46	8.56	1.88	NA	NA	20.71	21.81	090
27420		A	Revision of unstable kneecap	10.06	NA	NA	6.82	7.80	1.71	NA	NA	18.59	19.57	090
27422		A	Revision of unstable kneecap	10.01	NA	NA	6.78	7.80	1.70	NA	NA	18.49	19.51	090
27424		A	Revision/removal of kneecap	10.04	NA	NA	6.78	7.78	1.70	NA	NA	18.52	19.52	090
27425		A	Lat retinacular release open	5.21	NA	NA	4.63	5.31	0.90	NA	NA	10.74	11.42	090
27427		A	Reconstruction, knee	9.59	NA	NA	6.57	7.51	1.63	NA	NA	17.79	18.73	090
27428		A	Reconstruction, knee	15.23	NA	NA	9.93	10.94	2.42	NA	NA	27.58	28.59	090
27429		A	Reconstruction, knee	17.12	NA	NA	11.11	12.12	2.70	NA	NA	30.93	31.94	090
27430		A	Revision of thigh muscles	9.96	NA	NA	6.75	7.70	1.69	NA	NA	18.40	19.35	090
27435		A	Incision of knee joint	10.60	NA	NA	7.55	8.26	1.69	NA	NA	19.84	20.55	090
27437		A	Revise kneecap	8.75	NA	NA	6.12	6.98	1.49	NA	NA	16.36	17.22	090
27438		A	Revise kneecap with implant	11.69	NA	NA	7.42	8.28	1.95	NA	NA	21.06	21.92	090
27440		A	Revision of knee joint	10.89	NA	NA	7.03	6.27	1.81	NA	NA	19.73	18.97	090
27441		A	Revision of knee joint	11.34	NA	NA	7.35	6.89	1.88	NA	NA	20.57	20.11	090
27442		A	Revision of knee joint	12.17	NA	NA	7.63	8.61	2.09	NA	NA	21.89	22.87	090
27443		A	Revision of knee joint	11.21	NA	NA	7.26	8.38	1.90	NA	NA	20.37	21.49	090
27445		A	Revision of knee joint	18.43	NA	NA	10.31	11.87	3.08	NA	NA	31.82	33.38	090
27446		A	Revision of knee joint	16.18	NA	NA	9.18	10.77	2.80	NA	NA	28.16	29.75	090
27447		A	Total knee arthroplasty	20.81	NA	NA	11.48	13.85	3.79	NA	NA	36.08	38.45	090
27448		A	Incision of thigh	11.40	NA	NA	7.23	8.27	1.94	NA	NA	20.57	21.61	090
27450		A	Incision of thigh	14.38	NA	NA	8.64	10.12	2.42	NA	NA	25.44	26.92	090
27454		A	Realignment of thigh bone	18.89	NA	NA	10.53	12.04	3.12	NA	NA	32.54	34.05	090
27455		A	Realignment of knee	13.16	NA	NA	8.16	9.47	2.24	NA	NA	23.56	24.87	090
27457		A	Realignment of knee	13.85	NA	NA	8.09	9.49	2.34	NA	NA	24.28	25.68	090
27465		A	Shortening of thigh bone	18.36	NA	NA	10.09	10.21	2.47	NA	NA	30.92	31.04	090
27466		A	Lengthening of thigh bone	17.03	NA	NA	9.94	11.38	2.77	NA	NA	29.74	31.18	090
27468		A	Shorten/lengthen thighs	19.72	NA	NA	11.04	12.05	3.30	NA	NA	34.06	35.07	090
27470		A	Repair of thigh	16.87	NA	NA	9.88	11.34	2.79	NA	NA	29.54	31.00	090
27472		A	Repair/graft of thigh	18.47	NA	NA	10.50	12.17	3.07	NA	NA	32.04	33.71	090
27475		A	Surgery to stop leg growth	8.75	NA	NA	6.66	7.09	1.36	NA	NA	16.77	17.20	090
27477		A	Surgery to stop leg growth	9.96	NA	NA	6.52	7.44	1.73	NA	NA	18.21	19.13	090
27479		A	Surgery to stop leg growth	12.96	NA	NA	4.98	8.50	2.78	NA	NA	20.72	24.24	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
27485		A	Surgery to stop leg growth	8.95	NA	NA	6.12	7.10	1.53	NA	NA	16.60	17.58	090
27486		A	Revise/replace knee joint	20.84	NA	NA	11.49	13.02	3.36	NA	NA	35.69	37.22	090
27487		A	Revise/replace knee joint	26.83	NA	NA	13.83	15.91	4.39	NA	NA	45.05	47.13	090
27488		A	Removal of knee prosthesis	17.32	NA	NA	10.13	11.33	2.74	NA	NA	30.19	31.39	090
27495		A	Reinforce thigh	16.31	NA	NA	9.50	10.96	2.71	NA	NA	28.52	29.98	090
27496		A	Decompression of thigh/knee	6.58	NA	NA	4.98	5.46	0.99	NA	NA	12.55	13.03	090
27497		A	Decompression of thigh/knee	7.64	NA	NA	4.61	5.24	1.15	NA	NA	13.40	14.03	090
27498		A	Decompression of thigh/knee	8.46	NA	NA	5.36	5.82	1.24	NA	NA	15.06	15.52	090
27499		A	Decompression of thigh/knee	9.23	NA	NA	5.76	6.57	1.47	NA	NA	16.46	17.27	090
27500		A	Treatment of thigh fracture	6.15	5.35	5.94	4.57	4.89	1.02	12.52	13.11	11.74	12.06	090
27501		A	Treatment of thigh fracture	6.28	4.95	5.60	4.86	5.27	1.03	12.26	12.91	12.17	12.58	090
27502		A	Treatment of thigh fracture	11.16	NA	NA	6.79	7.80	1.78	NA	NA	19.73	20.74	090
27503		A	Treatment of thigh fracture	11.05	NA	NA	7.12	8.01	1.84	NA	NA	20.01	20.90	090
27506		A	Treatment of thigh fracture	19.32	NA	NA	10.98	12.36	3.03	NA	NA	33.33	34.71	090
27507		A	Treatment of thigh fracture	14.33	NA	NA	8.03	9.41	2.42	NA	NA	24.78	26.16	090
27508		A	Treatment of thigh fracture	6.00	5.62	6.27	4.99	5.37	0.97	12.59	13.24	11.96	12.34	090
27509		A	Treatment of thigh fracture	7.94	NA	NA	6.36	7.58	1.34	NA	NA	15.64	16.86	090
27510		A	Treatment of thigh fracture	9.60	NA	NA	6.22	7.07	1.53	NA	NA	17.35	18.20	090
27511		A	Treatment of thigh fracture	13.86	NA	NA	8.75	10.61	2.37	NA	NA	24.98	26.84	090
27513		A	Treatment of thigh fracture	19.37	NA	NA	11.43	13.30	3.12	NA	NA	33.92	35.79	090
27514		A	Treatment of thigh fracture	18.99	NA	NA	11.55	12.93	3.00	NA	NA	33.54	34.92	090
27516		A	Treat thigh fx growth plate	5.36	5.60	6.18	4.97	5.39	0.81	11.77	12.35	11.14	11.56	090
27517		A	Treat thigh fx growth plate	8.89	NA	NA	5.93	7.09	1.22	NA	NA	16.04	17.20	090
27519		A	Treat thigh fx growth plate	15.72	NA	NA	9.50	11.09	2.55	NA	NA	27.77	29.36	090
27520		A	Treat kneecap fracture	2.86	4.05	4.43	3.48	3.46	0.47	7.38	7.76	6.81	6.79	090
27524		A	Treat kneecap fracture	10.17	NA	NA	6.83	7.90	1.74	NA	NA	18.74	19.81	090
27530		A	Treat knee fracture	3.89	4.76	5.19	4.20	4.37	0.65	9.30	9.73	8.74	8.91	090
27532		A	Treat knee fracture	7.35	6.35	7.12	5.57	6.25	1.26	14.96	15.73	14.18	14.86	090
27535		A	Treat knee fracture	11.72	NA	NA	7.92	9.59	2.00	NA	NA	21.64	23.31	090
27536		A	Treat knee fracture	17.11	NA	NA	10.07	11.25	2.73	NA	NA	29.91	31.09	090
27538		A	Treat knee fracture(s)	4.86	5.46	5.98	4.84	5.12	0.84	11.16	11.68	10.54	10.82	090
27540		A	Treat knee fracture	13.38	NA	NA	7.84	9.12	2.27	NA	NA	23.49	24.77	090
27550		A	Treat knee dislocation	5.75	5.26	5.84	4.55	4.84	0.76	11.77	12.35	11.06	11.35	090
27552		A	Treat knee dislocation	7.95	NA	NA	6.01	6.73	1.36	NA	NA	15.32	16.04	090
27556		A	Treat knee dislocation	14.87	NA	NA	9.06	11.03	2.50	NA	NA	26.43	28.40	090
27557		A	Treat knee dislocation	17.22	NA	NA	10.31	12.45	2.97	NA	NA	30.50	32.64	090
27558		A	Treat knee dislocation	17.93	NA	NA	10.33	12.39	3.08	NA	NA	31.34	33.40	090
27560		A	Treat kneecap dislocation	3.81	3.89	4.61	3.37	3.24	0.40	8.10	8.82	7.58	7.45	090
27562		A	Treat kneecap dislocation	5.78	NA	NA	4.38	4.68	0.94	NA	NA	11.10	11.40	090
27566		A	Treat kneecap dislocation	12.51	NA	NA	7.68	8.93	2.12	NA	NA	22.31	23.56	090
27570		A	Fixation of knee joint	1.74	NA	NA	1.60	1.74	0.30	NA	NA	3.64	3.78	010
27580		A	Fusion of knee	20.82	NA	NA	12.03	14.14	3.37	NA	NA	36.22	38.33	090
27590		A	Amputate leg at thigh	13.27	NA	NA	6.15	6.56	1.74	NA	NA	21.16	21.57	090
27591		A	Amputate leg at thigh	13.74	NA	NA	7.30	8.33	2.02	NA	NA	23.06	24.09	090
27592		A	Amputate leg at thigh	10.78	NA	NA	5.51	6.02	1.45	NA	NA	17.74	18.25	090
27594		A	Amputation follow-up surgery	7.09	NA	NA	4.74	5.07	1.02	NA	NA	12.85	13.18	090
27596		A	Amputation follow-up surgery	11.06	NA	NA	6.03	6.63	1.57	NA	NA	18.66	19.26	090
27598		A	Amputate lower leg at knee	10.99	NA	NA	6.28	6.85	1.65	NA	NA	18.92	19.49	090
27600		A	Decompression of lower leg	5.88	NA	NA	3.86	4.37	0.86	NA	NA	10.60	11.11	090
27601		A	Decompression of lower leg	5.87	NA	NA	4.25	4.71	0.80	NA	NA	10.92	11.38	090
27602		A	Decompression of lower leg	7.64	NA	NA	4.43	4.96	1.10	NA	NA	13.17	13.70	090
27603		A	Drain lower leg lesion	5.05	7.01	7.39	3.86	4.09	0.74	12.80	13.18	9.65	9.88	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
27604		A	Drain lower leg bursa	4.46	6.41	6.18	3.37	3.82	0.69	11.56	11.33	8.52	8.97	090
27605		A	Incision of achilles tendon	2.87	5.24	7.09	1.76	2.19	0.41	8.52	10.37	5.04	5.47	010
27606		A	Incision of achilles tendon	4.13	NA	NA	2.62	3.18	0.69	NA	NA	7.44	8.00	010
27607		A	Treat lower leg bone lesion	8.44	NA	NA	5.64	6.05	1.31	NA	NA	15.39	15.80	090
27610		A	Explore/treat ankle joint	8.93	NA	NA	6.05	6.78	1.40	NA	NA	16.38	17.11	090
27612		A	Exploration of ankle joint	7.92	NA	NA	5.23	5.89	1.13	NA	NA	14.28	14.94	090
27613		A	Biopsy lower leg soft tissue	2.17	3.82	3.39	1.72	1.79	0.20	6.19	5.76	4.09	4.16	010
27614		A	Biopsy lower leg soft tissue	5.65	7.82	7.32	3.95	4.33	0.78	14.25	13.75	10.38	10.76	090
27615		A	Remove tumor, lower leg	12.84	NA	NA	7.90	9.04	1.83	NA	NA	22.57	23.71	090
27618		A	Remove lower leg lesion	5.08	6.35	6.11	3.74	3.94	0.72	12.15	11.91	9.54	9.74	090
27619		A	Remove lower leg lesion	8.39	9.97	9.65	5.21	5.78	1.25	19.61	19.29	14.85	15.42	090
27620		A	Explore/treat ankle joint	5.97	NA	NA	4.50	5.24	0.97	NA	NA	11.44	12.18	090
27625		A	Remove ankle joint lining	8.29	NA	NA	5.47	6.23	1.28	NA	NA	15.04	15.80	090
27626		A	Remove ankle joint lining	8.90	NA	NA	5.82	6.66	1.48	NA	NA	16.20	17.04	090
27630		A	Removal of tendon lesion	4.79	7.88	7.66	3.74	4.23	0.74	13.41	13.19	9.27	9.76	090
27635		A	Remove lower leg bone lesion	7.83	NA	NA	5.56	6.46	1.31	NA	NA	14.70	15.60	090
27637		A	Remove/graft leg bone lesion	10.08	NA	NA	7.07	8.00	1.66	NA	NA	18.81	19.74	090
27638		A	Remove/graft leg bone lesion	10.79	NA	NA	6.83	7.94	1.84	NA	NA	19.46	20.57	090
27640		A	Partial removal of tibia	12.01	NA	NA	8.04	9.77	1.88	NA	NA	21.93	23.66	090
27641		A	Partial removal of fibula	9.65	NA	NA	6.68	7.94	1.46	NA	NA	17.79	19.05	090
27645		A	Extensive lower leg surgery	14.69	NA	NA	9.36	11.40	2.41	NA	NA	26.46	28.50	090
27646		A	Extensive lower leg surgery	13.12	NA	NA	8.56	10.44	2.05	NA	NA	23.73	25.61	090
27647		A	Extensive ankle/heel surgery	12.76	NA	NA	6.48	7.34	1.75	NA	NA	20.99	21.85	090
27648		A	Injection for ankle x-ray	0.96	2.77	3.34	0.32	0.33	0.08	3.81	4.38	1.36	1.37	000
27650		A	Repair achilles tendon	9.86	NA	NA	6.16	7.19	1.59	NA	NA	17.61	18.64	090
27652		A	Repair/graft achilles tendon	10.55	NA	NA	6.30	7.61	1.71	NA	NA	18.56	19.87	090
27654		A	Repair of achilles tendon	10.24	NA	NA	5.84	6.83	1.58	NA	NA	17.66	18.65	090
27656		A	Repair leg fascia defect	4.56	8.10	8.44	3.67	3.75	0.69	13.35	13.69	8.92	9.00	090
27658		A	Repair of leg tendon, each	4.97	NA	NA	3.84	4.39	0.79	NA	NA	9.60	10.15	090
27659		A	Repair of leg tendon, each	6.92	NA	NA	4.79	5.44	1.09	NA	NA	12.80	13.45	090
27664		A	Repair of leg tendon, each	4.58	NA	NA	3.88	4.39	0.76	NA	NA	9.22	9.73	090
27665		A	Repair of leg tendon, each	5.39	NA	NA	4.40	4.84	0.89	NA	NA	10.68	11.12	090
27675		A	Repair lower leg tendons	7.17	NA	NA	4.64	5.47	1.11	NA	NA	12.92	13.75	090
27676		A	Repair lower leg tendons	8.53	NA	NA	5.64	6.49	1.37	NA	NA	15.54	16.39	090
27680		A	Release of lower leg tendon	5.73	NA	NA	4.28	4.91	0.93	NA	NA	10.94	11.57	090
27681		A	Release of lower leg tendons	6.87	NA	NA	4.67	5.62	1.15	NA	NA	12.69	13.64	090
27685		A	Revision of lower leg tendon	6.49	8.73	7.67	4.52	5.24	0.97	16.19	15.13	11.98	12.70	090
27686		A	Revise lower leg tendons	7.57	NA	NA	5.27	6.20	1.24	NA	NA	14.08	15.01	090
27687		A	Revision of calf tendon	6.23	NA	NA	4.42	5.10	1.00	NA	NA	11.65	12.33	090
27690		A	Revise lower leg tendon	8.88	NA	NA	5.34	6.11	1.33	NA	NA	15.55	16.32	090
27691		A	Revise lower leg tendon	10.19	NA	NA	6.57	7.48	1.64	NA	NA	18.40	19.31	090
27692		A	Revise additional leg tendon	1.87	NA	NA	0.71	0.88	0.32	NA	NA	2.90	3.07	ZZZ
27695		A	Repair of ankle ligament	6.50	NA	NA	4.90	5.64	1.05	NA	NA	12.45	13.19	090
27696		A	Repair of ankle ligaments	8.38	NA	NA	5.29	6.16	1.28	NA	NA	14.95	15.82	090
27698		A	Repair of ankle ligament	9.41	NA	NA	5.78	6.67	1.47	NA	NA	16.66	17.55	090
27700		A	Revision of ankle joint	9.46	NA	NA	5.03	5.53	1.30	NA	NA	15.79	16.29	090
27702		A	Reconstruct ankle joint	14.19	NA	NA	8.56	10.01	2.37	NA	NA	25.12	26.57	090
27703		A	Reconstruction, ankle joint	16.69	NA	NA	9.69	10.87	2.76	NA	NA	29.14	30.32	090
27704		A	Removal of ankle implant	7.61	NA	NA	5.60	5.61	1.27	NA	NA	14.48	14.49	090
27705		A	Incision of tibia	10.66	NA	NA	6.78	7.84	1.80	NA	NA	19.24	20.30	090
27707		A	Incision of fibula	4.60	NA	NA	4.42	4.82	0.76	NA	NA	9.78	10.18	090
27709		A	Incision of tibia & fibula	17.24	NA	NA	9.47	8.48	1.73	NA	NA	28.44	27.45	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
27712		A	Realignment of lower leg	15.59	NA	NA	8.98	10.32	2.47	NA	NA	27.04	28.38	090
27715		A	Revision of lower leg	15.27	NA	NA	8.83	10.31	2.49	NA	NA	26.59	28.07	090
27720		A	Repair of tibia	12.13	NA	NA	7.81	9.03	2.04	NA	NA	21.98	23.20	090
27722		A	Repair/graft of tibia	12.22	NA	NA	7.90	8.85	2.05	NA	NA	22.17	23.12	090
27724		A	Repair/graft of tibia	19.12	NA	NA	10.10	11.83	3.16	NA	NA	32.38	34.11	090
27725		A	Repair of lower leg	17.07	NA	NA	10.41	11.56	2.71	NA	NA	30.19	31.34	090
27727		A	Repair of lower leg	14.59	NA	NA	8.40	9.88	2.43	NA	NA	25.42	26.90	090
27730		A	Repair of tibia epiphysis	7.52	NA	NA	5.21	6.13	1.72	NA	NA	14.45	15.37	090
27732		A	Repair of fibula epiphysis	5.31	NA	NA	4.60	4.86	0.77	NA	NA	10.68	10.94	090
27734		A	Repair lower leg epiphyses	8.65	NA	NA	6.08	6.25	1.35	NA	NA	16.08	16.25	090
27740		A	Repair of leg epiphyses	9.41	NA	NA	6.52	7.64	1.62	NA	NA	17.55	18.67	090
27742		A	Repair of leg epiphyses	10.40	3.04	4.95	5.19	5.48	1.79	15.23	17.14	17.38	17.67	090
27745		A	Reinforce tibia	10.29	NA	NA	6.87	7.86	1.75	NA	NA	18.91	19.90	090
27750		A	Treatment of tibia fracture	3.19	4.26	4.64	3.68	3.82	0.55	8.00	8.38	7.42	7.56	090
27752		A	Treatment of tibia fracture	6.07	5.89	6.48	5.05	5.53	1.01	12.97	13.56	12.13	12.61	090
27756		A	Treatment of tibia fracture	7.25	NA	NA	5.65	6.27	1.17	NA	NA	14.07	14.69	090
27758		A	Treatment of tibia fracture	12.31	NA	NA	7.90	8.88	2.03	NA	NA	22.24	23.22	090
27759		A	Treatment of tibia fracture	14.23	NA	NA	8.54	9.89	2.38	NA	NA	25.15	26.50	090
27760		A	Treatment of ankle fracture	3.01	4.23	4.58	3.63	3.61	0.48	7.72	8.07	7.12	7.10	090
27762		A	Treatment of ankle fracture	5.24	5.50	6.14	4.67	5.14	0.85	11.59	12.23	10.76	11.23	090
27766		A	Treatment of ankle fracture	8.65	NA	NA	6.16	6.97	1.44	NA	NA	16.25	17.06	090
27780		A	Treatment of fibula fracture	2.65	3.84	4.10	3.28	3.24	0.41	6.90	7.16	6.34	6.30	090
27781		A	Treatment of fibula fracture	4.39	4.89	5.36	4.27	4.56	0.73	10.01	10.48	9.39	9.68	090
27784		A	Treatment of fibula fracture	7.34	NA	NA	5.50	6.24	1.23	NA	NA	14.07	14.81	090
27786		A	Treatment of ankle fracture	2.84	4.01	4.36	3.39	3.35	0.46	7.31	7.66	6.69	6.65	090
27788		A	Treatment of ankle fracture	4.44	4.93	5.48	4.20	4.55	0.74	10.11	10.66	9.38	9.73	090
27792		A	Treatment of ankle fracture	7.83	NA	NA	5.83	6.69	1.32	NA	NA	14.98	15.84	090
27808		A	Treatment of ankle fracture	2.83	4.34	4.69	3.65	3.70	0.46	7.63	7.98	6.94	6.99	090
27810		A	Treatment of ankle fracture	5.12	5.38	6.04	4.53	5.00	0.82	11.32	11.98	10.47	10.94	090
27814		A	Treatment of ankle fracture	11.02	NA	NA	7.13	8.22	1.85	NA	NA	20.00	21.09	090
27816		A	Treatment of ankle fracture	2.89	3.98	4.29	3.31	3.39	0.43	7.30	7.61	6.63	6.71	090
27818		A	Treatment of ankle fracture	5.49	5.36	6.13	4.40	4.99	0.82	11.67	12.44	10.71	11.30	090
27822		A	Treatment of ankle fracture	12.04	NA	NA	8.71	10.19	1.91	NA	NA	22.66	24.14	090
27823		A	Treatment of ankle fracture	14.18	NA	NA	9.33	10.96	2.25	NA	NA	25.76	27.39	090
27824		A	Treat lower leg fracture	3.14	3.69	3.98	3.50	3.55	0.45	7.28	7.57	7.09	7.14	090
27825		A	Treat lower leg fracture	6.54	5.78	6.41	4.75	5.24	1.02	13.34	13.97	12.31	12.80	090
27826		A	Treat lower leg fracture	8.89	NA	NA	6.89	8.36	1.47	NA	NA	17.25	18.72	090
27827		A	Treat lower leg fracture	15.65	NA	NA	10.62	12.26	2.43	NA	NA	28.70	30.34	090
27828		A	Treat lower leg fracture	18.07	NA	NA	12.12	13.51	2.81	NA	NA	33.00	34.39	090
27829		A	Treat lower leg joint	5.60	NA	NA	5.44	6.46	0.95	NA	NA	11.99	13.01	090
27830		A	Treat lower leg dislocation	3.78	4.25	4.36	3.70	3.82	0.54	8.57	8.68	8.02	8.14	090
27831		A	Treat lower leg dislocation	4.55	NA	NA	3.94	4.34	0.73	NA	NA	9.22	9.62	090
27832		A	Treat lower leg dislocation	6.60	NA	NA	4.65	5.81	1.03	NA	NA	12.28	13.44	090
27840		A	Treat ankle dislocation	4.57	NA	NA	3.59	3.73	0.46	NA	NA	8.62	8.76	090
27842		A	Treat ankle dislocation	6.26	NA	NA	4.81	5.05	1.00	NA	NA	12.07	12.31	090
27846		A	Treat ankle dislocation	10.08	NA	NA	6.73	7.65	1.70	NA	NA	18.51	19.43	090
27848		A	Treat ankle dislocation	11.48	NA	NA	7.57	9.20	1.94	NA	NA	20.99	22.62	090
27860		A	Fixation of ankle joint	2.34	NA	NA	1.67	1.91	0.39	NA	NA	4.40	4.64	010
27870		A	Fusion of ankle joint, open	15.13	NA	NA	9.00	10.16	2.36	NA	NA	26.49	27.65	090
27871		A	Fusion of tibiofibular joint	9.34	NA	NA	6.40	7.30	1.59	NA	NA	17.33	18.23	090
27880		A	Amputation of lower leg	15.18	NA	NA	7.13	7.15	1.75	NA	NA	24.06	24.08	090
27881		A	Amputation of lower leg	13.22	NA	NA	7.42	8.51	1.98	NA	NA	22.62	23.71	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
27882		A	Amputation of lower leg	9.59	NA	NA	5.61	6.28	1.29	NA	NA	16.49	17.16	090
27884		A	Amputation follow-up surgery	8.56	NA	NA	5.09	5.60	1.22	NA	NA	14.87	15.38	090
27886		A	Amputation follow-up surgery	9.79	NA	NA	5.74	6.33	1.40	NA	NA	16.93	17.52	090
27888		A	Amputation of foot at ankle	10.14	NA	NA	6.19	7.19	1.51	NA	NA	17.84	18.84	090
27889		A	Amputation of foot at ankle	10.63	NA	NA	5.44	6.23	1.46	NA	NA	17.53	18.32	090
27892		A	Decompression of leg	7.74	NA	NA	4.86	5.42	1.10	NA	NA	13.70	14.26	090
27893		A	Decompression of leg	7.70	NA	NA	5.05	5.37	1.10	NA	NA	13.85	14.17	090
27894		A	Decompression of leg	12.32	NA	NA	7.30	7.67	1.65	NA	NA	21.27	21.64	090
28001		A	Drainage of bursa of foot	2.73	3.99	3.24	1.60	1.87	0.33	7.05	6.30	4.66	4.93	010
28002		A	Treatment of foot infection	5.72	6.69	5.42	3.56	3.73	0.61	13.02	11.75	9.89	10.06	010
28003		A	Treatment of foot infection	8.88	7.77	6.63	4.54	5.07	1.12	17.77	16.63	14.54	15.07	090
28005		A	Treat foot bone lesion	9.21	NA	NA	5.24	5.86	1.16	NA	NA	15.61	16.23	090
28008		A	Incision of foot fascia	4.44	6.15	4.96	2.97	3.15	0.57	11.16	9.97	7.98	8.16	090
28010		A	Incision of toe tendon	2.84	2.83	2.49	2.31	2.36	0.36	6.03	5.69	5.51	5.56	090
28011		A	Incision of toe tendons	4.13	NA	NA	3.00	3.23	0.59	NA	NA	7.72	7.95	090
28020		A	Exploration of foot joint	5.00	7.48	6.39	3.62	4.01	0.72	13.20	12.11	9.34	9.73	090
28022		A	Exploration of foot joint	4.66	6.85	5.62	3.27	3.71	0.62	12.13	10.90	8.55	8.99	090
28024		A	Exploration of toe joint	4.37	6.62	5.58	3.13	3.73	0.58	11.57	10.53	8.08	8.68	090
28030		A	Removal of foot nerve	6.14	NA	NA	3.30	3.57	0.74	NA	NA	10.18	10.45	090
28035		A	Decompression of tibia nerve	5.08	7.40	6.25	3.60	3.98	0.70	13.18	12.03	9.38	9.76	090
28043		A	Excision of foot lesion	3.53	4.78	4.06	2.72	3.07	0.46	8.77	8.05	6.71	7.06	090
28045		A	Excision of foot lesion	4.71	7.03	5.80	3.23	3.52	0.63	12.37	11.14	8.57	8.86	090
28046		A	Resection of tumor, foot	10.46	10.35	9.18	5.72	6.30	1.36	22.17	21.00	17.54	18.12	090
28050		A	Biopsy of foot joint lining	4.24	6.83	5.38	3.22	3.51	0.60	11.67	10.22	8.06	8.35	090
28052		A	Biopsy of foot joint lining	3.93	6.40	5.29	2.91	3.31	0.53	10.86	9.75	7.37	7.77	090
28054		A	Biopsy of toe joint lining	3.44	6.18	5.09	2.74	3.12	0.46	10.08	8.99	6.64	7.02	090
28060		A	Partial removal, foot fascia	5.22	7.09	5.89	3.53	3.79	0.70	13.01	11.81	9.45	9.71	090
28062		A	Removal of foot fascia	6.51	7.80	6.85	3.78	3.96	0.83	15.14	14.19	11.12	11.30	090
28070		A	Removal of foot joint lining	5.09	7.18	5.72	3.42	3.72	0.73	13.00	11.54	9.24	9.54	090
28072		A	Removal of foot joint lining	4.57	7.58	6.05	3.59	4.13	0.68	12.83	11.30	8.84	9.38	090
28080		A	Removal of foot lesion	4.57	7.63	5.75	4.16	3.81	0.47	12.67	10.79	9.20	8.85	090
28086		A	Excise foot tendon sheath	4.77	7.76	7.94	3.74	4.45	0.76	13.29	13.47	9.27	9.98	090
28088		A	Excise foot tendon sheath	3.85	6.94	6.06	3.14	3.71	0.61	11.40	10.52	7.60	8.17	090
28090		A	Removal of foot lesion	4.40	6.75	5.55	3.15	3.38	0.59	11.74	10.54	8.14	8.37	090
28092		A	Removal of toe lesions	3.63	6.46	5.54	2.97	3.39	0.49	10.58	9.66	7.09	7.51	090
28100		A	Removal of ankle/heel lesion	5.65	8.18	8.03	4.03	4.53	0.82	14.65	14.50	10.50	11.00	090
28102		A	Remove/graft foot lesion	7.72	NA	NA	4.87	5.69	1.14	NA	NA	13.73	14.55	090
28103		A	Remove/graft foot lesion	6.49	NA	NA	4.10	4.49	0.91	NA	NA	11.50	11.89	090
28104		A	Removal of foot lesion	5.11	7.20	5.93	3.43	3.81	0.70	13.01	11.74	9.24	9.62	090
28106		A	Remove/graft foot lesion	7.15	NA	NA	4.37	4.42	0.97	NA	NA	12.49	12.54	090
28107		A	Remove/graft foot lesion	5.55	7.82	6.86	3.70	4.08	0.74	14.11	13.15	9.99	10.37	090
28108		A	Removal of toe lesions	4.15	6.33	5.03	2.96	3.19	0.53	11.01	9.71	7.64	7.87	090
28110		A	Part removal of metatarsal	4.07	6.93	5.66	3.04	3.18	0.54	11.54	10.27	7.65	7.79	090
28111		A	Part removal of metatarsal	5.00	7.31	6.55	3.28	3.57	0.67	12.98	12.22	8.95	9.24	090
28112		A	Part removal of metatarsal	4.48	7.22	6.17	3.24	3.50	0.61	12.31	11.26	8.33	8.59	090
28113		A	Part removal of metatarsal	5.78	8.38	6.65	4.60	4.39	0.63	14.79	13.06	11.01	10.80	090
28114		A	Removal of metatarsal heads	11.49	13.21	12.04	8.15	8.33	1.42	26.12	24.95	21.06	21.24	090
28116		A	Revision of foot	8.86	9.42	7.46	5.30	5.21	1.03	19.31	17.35	15.19	15.10	090
28118		A	Removal of heel bone	5.95	7.89	6.67	3.98	4.26	0.84	14.68	13.46	10.77	11.05	090
28119		A	Removal of heel spur	5.38	7.18	5.88	3.54	3.68	0.70	13.26	11.96	9.62	9.76	090
28120		A	Part removal of ankle/heel	5.57	8.04	7.49	3.92	4.30	0.77	14.38	13.83	10.26	10.64	090
28122		A	Partial removal of foot bone	7.46	8.45	7.25	4.74	5.15	0.98	16.89	15.69	13.18	13.59	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
28124		A	Partial removal of toe	4.80	6.73	5.43	3.41	3.60	0.60	12.13	10.83	8.81	9.00	090
28126		A	Partial removal of toe	3.51	5.92	4.65	2.63	2.91	0.45	9.88	8.61	6.59	6.87	090
28130		A	Removal of ankle bone	9.22	NA	NA	5.78	6.49	1.26	NA	NA	16.26	16.97	090
28140		A	Removal of metatarsal	6.96	7.84	7.39	4.11	4.61	0.92	15.72	15.27	11.99	12.49	090
28150		A	Removal of toe	4.08	6.39	5.23	2.98	3.21	0.53	11.00	9.84	7.59	7.82	090
28153		A	Partial removal of toe	3.65	6.15	4.78	2.84	2.73	0.47	10.27	8.90	6.96	6.85	090
28160		A	Partial removal of toe	3.73	6.33	5.01	2.92	3.24	0.49	10.55	9.23	7.14	7.46	090
28171		A	Extensive foot surgery	9.77	NA	NA	5.10	5.36	1.33	NA	NA	16.20	16.46	090
28173		A	Extensive foot surgery	8.97	8.74	7.89	4.60	5.06	1.12	18.83	17.98	14.69	15.15	090
28175		A	Extensive foot surgery	6.10	7.08	6.06	3.57	3.68	0.73	13.91	12.89	10.40	10.51	090
28190		A	Removal of foot foreign body	1.96	4.00	3.55	1.32	1.44	0.22	6.18	5.73	3.50	3.62	010
28192		A	Removal of foot foreign body	4.63	6.71	5.80	3.17	3.53	0.61	11.95	11.04	8.41	8.77	090
28193		A	Removal of foot foreign body	5.72	7.29	6.04	3.58	3.84	0.73	13.74	12.49	10.03	10.29	090
28200		A	Repair of foot tendon	4.59	6.85	5.54	3.20	3.47	0.61	12.05	10.74	8.40	8.67	090
28202		A	Repair/graft of foot tendon	6.89	7.91	7.40	4.00	4.38	0.91	15.71	15.20	11.80	12.18	090
28208		A	Repair of foot tendon	4.36	6.64	5.28	3.14	3.27	0.58	11.58	10.22	8.08	8.21	090
28210		A	Repair/graft of foot tendon	6.34	7.50	6.55	3.84	3.98	0.81	14.65	13.70	10.99	11.13	090
28220		A	Release of foot tendon	4.52	6.37	5.10	3.03	3.33	0.57	11.46	10.19	8.12	8.42	090
28222		A	Release of foot tendons	5.61	6.84	5.65	3.27	3.92	0.69	13.14	11.95	9.57	10.22	090
28225		A	Release of foot tendon	3.65	5.99	4.72	2.69	2.86	0.46	10.10	8.83	6.80	6.97	090
28226		A	Release of foot tendons	4.52	6.94	5.34	3.27	3.63	0.58	12.04	10.44	8.37	8.73	090
28230		A	Incision of foot tendon(s)	4.23	6.26	5.08	2.85	3.47	0.55	11.04	9.86	7.63	8.25	090
28232		A	Incision of toe tendon	3.38	5.91	4.88	2.65	3.15	0.44	9.73	8.70	6.47	6.97	090
28234		A	Incision of foot tendon	3.36	6.25	5.07	3.01	3.27	0.44	10.05	8.87	6.81	7.07	090
28238		A	Revision of foot tendon	7.78	8.28	7.52	4.28	4.78	1.06	17.12	16.36	13.12	13.62	090
28240		A	Release of big toe	4.35	6.38	5.08	2.95	3.36	0.58	11.31	10.01	7.88	8.29	090
28250		A	Revision of foot fascia	5.91	7.37	6.07	3.70	4.03	0.82	14.10	12.80	10.43	10.76	090
28260		A	Release of midfoot joint	8.01	8.53	6.89	4.64	4.91	1.14	17.68	16.04	13.79	14.06	090
28261		A	Revision of foot tendon	12.83	10.60	9.12	6.26	7.06	1.57	25.00	23.52	20.66	21.46	090
28262		A	Revision of foot and ankle	16.93	15.42	14.05	9.62	10.61	2.59	34.94	33.57	29.14	30.13	090
28264		A	Release of midfoot joint	10.45	10.30	8.39	5.91	6.95	1.54	22.29	20.38	17.90	18.94	090
28270		A	Release of foot contracture	4.75	6.88	5.40	3.40	3.66	0.62	12.25	10.77	8.77	9.03	090
28272		A	Release of toe joint, each	3.79	5.80	4.59	2.62	2.80	0.46	10.05	8.84	6.87	7.05	090
28280		A	Fusion of toes	5.18	7.31	6.52	3.53	4.25	0.73	13.22	12.43	9.44	10.16	090
28285		A	Repair of hammertoe	4.58	6.67	5.32	3.31	3.40	0.59	11.84	10.49	8.48	8.57	090
28286		A	Repair of hammertoe	4.55	6.45	5.21	3.00	3.20	0.57	11.57	10.33	8.12	8.32	090
28288		A	Partial removal of foot bone	5.73	8.58	6.61	4.66	4.83	0.65	14.96	12.99	11.04	11.21	090
28289		A	Repair hallux rigidus	8.03	9.38	8.35	5.29	5.66	1.02	18.43	17.40	14.34	14.71	090
28290		A	Correction of bunion	5.65	8.13	6.74	3.91	4.53	0.82	14.60	13.21	10.38	11.00	090
28292		A	Correction of bunion	8.60	10.27	8.18	6.08	5.68	0.91	19.78	17.69	15.59	15.19	090
28293		A	Correction of bunion	10.96	14.40	11.68	6.84	6.30	1.13	26.49	23.77	18.93	18.39	090
28294		A	Correction of bunion	8.55	9.03	7.85	4.50	4.67	1.09	18.67	17.49	14.14	14.31	090
28296		A	Correction of bunion	9.23	9.51	8.51	4.73	5.26	1.19	19.93	18.93	15.15	15.68	090
28297		A	Correction of bunion	9.23	10.35	9.32	5.24	6.01	1.32	20.90	19.87	15.79	16.56	090
28298		A	Correction of bunion	7.93	9.16	7.71	4.49	4.88	1.05	18.14	16.69	13.47	13.86	090
28299		A	Correction of bunion	11.31	10.46	9.21	5.64	5.97	1.37	23.14	21.89	18.32	18.65	090
28300		A	Incision of heel bone	9.53	NA	NA	5.99	6.79	1.54	NA	NA	17.06	17.86	090
28302		A	Incision of ankle bone	9.54	NA	NA	5.64	6.59	1.42	NA	NA	16.60	17.55	090
28304		A	Incision of midfoot bones	9.21	9.46	8.34	5.00	5.56	1.27	19.94	18.82	15.48	16.04	090
28305		A	Incise/graft midfoot bones	10.54	NA	NA	5.48	6.43	1.27	NA	NA	17.29	18.24	090
28306		A	Incision of metatarsal	5.85	8.28	7.21	3.80	4.09	0.84	14.97	13.90	10.49	10.78	090
28307		A	Incision of metatarsal	6.32	9.45	10.65	4.40	5.08	0.90	16.67	17.87	11.62	12.30	090
28308		A	Incision of metatarsal	5.28	7.84	6.28	3.76	3.71	0.70	13.82	12.26	9.74	9.69	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
28309		A	Incision of metatarsals	13.88	NA	NA	7.63	7.89	2.04	NA	NA	23.55	23.81	090
28310		A	Revision of big toe	5.42	7.45	6.18	3.35	3.51	0.70	13.57	12.30	9.47	9.63	090
28312		A	Revision of toe	4.54	7.32	5.92	3.19	3.53	0.63	12.49	11.09	8.36	8.70	090
28313		A	Repair deformity of toe	5.00	7.31	5.80	3.61	4.53	0.73	13.04	11.53	9.34	10.26	090
28315		A	Removal of sesamoid bone	4.85	6.65	5.34	3.19	3.30	0.63	12.13	10.82	8.67	8.78	090
28320		A	Repair of foot bones	9.17	NA	NA	5.67	6.47	1.43	NA	NA	16.27	17.07	090
28322		A	Repair of metatarsals	8.33	9.92	9.38	5.39	6.11	1.27	19.52	18.98	14.99	15.71	090
28340		A	Resect enlarged toe tissue	6.97	7.96	6.84	3.99	4.19	0.84	15.77	14.65	11.80	12.00	090
28341		A	Resect enlarged toe	8.52	8.57	7.36	4.38	4.71	1.01	18.10	16.89	13.91	14.24	090
28344		A	Repair extra toe(s)	4.25	6.74	6.01	3.13	3.51	0.51	11.50	10.77	7.89	8.27	090
28345		A	Repair webbed toe(s)	5.91	7.72	6.59	3.82	4.47	0.80	14.43	13.30	10.53	11.18	090
28360		A	Reconstruct cleft foot	14.57	NA	NA	6.24	9.45	2.28	NA	NA	23.09	26.30	090
28400		A	Treatment of heel fracture	2.16	3.34	3.57	2.89	3.02	0.35	5.85	6.08	5.40	5.53	090
28405		A	Treatment of heel fracture	4.56	4.47	4.75	3.70	4.40	0.73	9.76	10.04	8.99	9.69	090
28406		A	Treatment of heel fracture	6.36	NA	NA	5.47	6.48	1.11	NA	NA	12.94	13.95	090
28415		A	Treat heel fracture	17.44	NA	NA	10.70	12.67	2.66	NA	NA	30.80	32.77	090
28420		A	Treat/graft heel fracture	16.98	NA	NA	9.98	12.21	2.80	NA	NA	29.76	31.99	090
28430		A	Treatment of ankle fracture	2.09	3.10	3.33	2.55	2.57	0.31	5.50	5.73	4.95	4.97	090
28435		A	Treatment of ankle fracture	3.39	3.72	3.85	3.04	3.57	0.55	7.66	7.79	6.98	7.51	090
28436		A	Treatment of ankle fracture	4.70	NA	NA	4.79	5.65	0.81	NA	NA	10.30	11.16	090
28445		A	Treat ankle fracture	16.99	NA	NA	9.53	10.68	2.58	NA	NA	29.10	30.25	090
28450		A	Treat midfoot fracture, each	1.90	2.90	3.07	2.40	2.46	0.28	5.08	5.25	4.58	4.64	090
28455		A	Treat midfoot fracture, each	3.09	3.47	3.44	2.84	3.28	0.44	7.00	6.97	6.37	6.81	090
28456		A	Treat midfoot fracture	2.68	NA	NA	3.46	3.99	0.44	NA	NA	6.58	7.11	090
28465		A	Treat midfoot fracture, each	7.06	NA	NA	4.98	5.99	1.10	NA	NA	13.14	14.15	090
28470		A	Treat metatarsal fracture	1.99	2.80	3.05	2.36	2.43	0.30	5.09	5.34	4.65	4.72	090
28475		A	Treat metatarsal fracture	2.97	3.14	3.29	2.52	3.05	0.44	6.55	6.70	5.93	6.46	090
28476		A	Treat metatarsal fracture	3.37	NA	NA	4.17	4.79	0.54	NA	NA	8.08	8.70	090
28485		A	Treat metatarsal fracture	5.70	NA	NA	4.49	5.22	0.83	NA	NA	11.02	11.75	090
28490		A	Treat big toe fracture	1.09	2.09	2.04	1.67	1.65	0.14	3.32	3.27	2.90	2.88	090
28495		A	Treat big toe fracture	1.58	2.45	2.25	1.85	2.02	0.20	4.23	4.03	3.63	3.80	090
28496		A	Treat big toe fracture	2.33	7.14	7.99	2.86	3.12	0.36	9.83	10.68	5.55	5.81	090
28505		A	Treat big toe fracture	3.80	7.43	7.95	3.23	3.74	0.56	11.79	12.31	7.59	8.10	090
28510		A	Treatment of toe fracture	1.09	1.66	1.56	1.59	1.55	0.14	2.89	2.79	2.82	2.78	090
28515		A	Treatment of toe fracture	1.46	2.22	1.98	1.82	1.88	0.18	3.86	3.62	3.46	3.52	090
28525		A	Treat toe fracture	3.32	6.84	7.36	2.87	3.30	0.49	10.65	11.17	6.68	7.11	090
28530		A	Treat sesamoid bone fracture	1.06	1.63	1.49	1.34	1.42	0.14	2.83	2.69	2.54	2.62	090
28531		A	Treat sesamoid bone fracture	2.47	5.77	6.90	2.09	2.08	0.34	8.58	9.71	4.90	4.89	090
28540		A	Treat foot dislocation	2.04	2.74	2.49	2.30	2.38	0.26	5.04	4.79	4.60	4.68	090
28545		A	Treat foot dislocation	2.45	3.28	2.58	2.68	2.43	0.37	6.10	5.40	5.50	5.25	090
28546		A	Treat foot dislocation	3.20	7.66	7.11	3.43	4.15	0.52	11.38	10.83	7.15	7.87	090
28555		A	Repair foot dislocation	6.35	9.73	9.88	4.89	5.49	1.04	17.12	17.27	12.28	12.88	090
28570		A	Treat foot dislocation	1.66	2.57	2.47	1.98	2.25	0.23	4.46	4.36	3.87	4.14	090
28575		A	Treat foot dislocation	3.31	4.32	3.88	3.63	3.71	0.56	8.19	7.75	7.50	7.58	090
28576		A	Treat foot dislocation	4.40	NA	NA	3.92	4.12	0.69	NA	NA	9.01	9.21	090
28585		A	Repair foot dislocation	8.10	9.83	7.96	5.19	5.69	1.25	19.18	17.31	14.54	15.04	090
28600		A	Treat foot dislocation	1.89	3.02	2.87	2.37	2.61	0.27	5.18	5.03	4.53	4.77	090
28605		A	Treat foot dislocation	2.71	3.69	3.27	3.10	3.12	0.40	6.80	6.38	6.21	6.23	090
28606		A	Treat foot dislocation	4.89	NA	NA	4.26	4.59	0.82	NA	NA	9.97	10.30	090
28615		A	Repair foot dislocation	8.88	NA	NA	6.88	7.77	1.30	NA	NA	17.06	17.95	090
28630		A	Treat toe dislocation	1.70	1.94	1.66	0.93	0.98	0.20	3.84	3.56	2.83	2.88	010
28635		A	Treat toe dislocation	1.91	2.24	2.08	1.31	1.48	0.26	4.41	4.25	3.48	3.65	010

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
28636		A	Treat toe dislocation	2.77	4.36	4.00	2.03	2.48	0.43	7.56	7.20	5.23	5.68	010
28645		A	Repair toe dislocation	4.21	6.79	5.42	3.14	3.25	0.57	11.57	10.20	7.92	8.03	090
28660		A	Treat toe dislocation	1.23	1.29	1.27	0.77	0.79	0.13	2.65	2.63	2.13	2.15	010
28665		A	Treat toe dislocation	1.92	NA	NA	1.32	1.40	0.26	NA	NA	3.50	3.58	010
28666		A	Treat toe dislocation	2.66	5.25	5.74	1.89	2.42	0.43	8.34	8.83	4.98	5.51	010
28675		A	Repair of toe dislocation	2.92	6.66	7.04	2.83	3.23	0.45	10.03	10.41	6.20	6.60	090
28705		A	Fusion of foot bones	20.04	NA	NA	10.54	11.99	3.08	NA	NA	33.66	35.11	090
28715		A	Fusion of foot bones	14.32	NA	NA	8.34	9.42	2.16	NA	NA	24.82	25.90	090
28725		A	Fusion of foot bones	11.89	NA	NA	6.79	7.89	1.86	NA	NA	20.54	21.64	090
28730		A	Fusion of foot bones	12.11	NA	NA	7.63	8.28	1.70	NA	NA	21.44	22.09	090
28735		A	Fusion of foot bones	11.95	NA	NA	6.81	7.58	1.68	NA	NA	20.44	21.21	090
28737		A	Revision of foot bones	10.75	NA	NA	5.97	6.61	1.47	NA	NA	18.19	18.83	090
28740		A	Fusion of foot bones	9.01	10.82	10.87	5.94	6.35	1.22	21.05	21.10	16.17	16.58	090
28750		A	Fusion of big toe joint	8.29	10.74	11.64	5.84	6.47	1.13	20.16	21.06	15.26	15.89	090
28755		A	Fusion of big toe joint	4.73	7.21	6.39	3.31	3.65	0.65	12.59	11.77	8.69	9.03	090
28760		A	Fusion of big toe joint	8.86	9.86	8.46	5.24	5.46	1.05	19.77	18.37	15.15	15.37	090
28800		A	Amputation of midfoot	8.56	NA	NA	5.05	5.62	1.15	NA	NA	14.76	15.33	090
28805		A	Amputation thru metatarsal	12.47	NA	NA	6.04	5.76	1.18	NA	NA	19.69	19.41	090
28810		A	Amputation toe & metatarsal	6.44	NA	NA	4.13	4.39	0.86	NA	NA	11.43	11.69	090
28820		A	Amputation of toe	4.82	7.74	7.61	3.58	3.74	0.61	13.17	13.04	9.01	9.17	090
28825		A	Partial amputation of toe	3.64	7.21	7.06	3.15	3.41	0.50	11.35	11.20	7.29	7.55	090
28890		A	High energy eswt, plantar f	3.30	4.59	5.45	2.27	2.14	0.41	8.30	9.16	5.98	5.85	090
29000		A	Application of body cast	2.25	4.67	3.40	1.81	1.76	0.41	7.33	6.06	4.47	4.42	000
29010		A	Application of body cast	2.06	3.33	3.30	1.30	1.66	0.45	5.84	5.81	3.81	4.17	000
29015		A	Application of body cast	2.41	3.32	3.07	1.44	1.56	0.28	6.01	5.76	4.13	4.25	000
29020		A	Application of body cast	2.11	3.74	3.33	1.46	1.42	0.28	6.13	5.72	3.85	3.81	000
29025		A	Application of body cast	2.40	3.58	3.26	1.56	1.79	0.44	6.42	6.10	4.40	4.63	000
29035		A	Application of body cast	1.77	3.66	3.63	1.46	1.55	0.28	5.71	5.68	3.51	3.60	000
29040		A	Application of body cast	2.22	3.59	2.75	1.47	1.50	0.36	6.17	5.33	4.05	4.08	000
29044		A	Application of body cast	2.12	3.93	3.97	1.63	1.84	0.35	6.40	6.44	4.10	4.31	000
29046		A	Application of body cast	2.41	4.16	3.47	1.77	2.02	0.42	6.99	6.30	4.60	4.85	000
29049		A	Application of figure eight	0.89	1.16	1.27	0.61	0.55	0.13	2.18	2.29	1.63	1.57	000
29055		A	Application of shoulder cast	1.78	2.88	2.96	1.29	1.43	0.30	4.96	5.04	3.37	3.51	000
29058		A	Application of shoulder cast	1.31	1.25	1.48	0.68	0.71	0.17	2.73	2.96	2.16	2.19	000
29065		A	Application of long arm cast	0.87	1.27	1.32	0.69	0.74	0.15	2.29	2.34	1.71	1.76	000
29075		A	Application of forearm cast	0.77	1.10	1.22	0.65	0.67	0.13	2.00	2.12	1.55	1.57	000
29085		A	Apply hand/wrist cast	0.87	1.25	1.27	0.68	0.64	0.14	2.26	2.28	1.69	1.65	000
29086		A	Apply finger cast	0.62	1.03	0.98	0.53	0.50	0.07	1.72	1.67	1.22	1.19	000
29105		A	Apply long arm splint	0.87	1.08	1.19	0.53	0.52	0.12	2.07	2.18	1.52	1.51	000
29125		A	Apply forearm splint	0.59	0.96	1.01	0.42	0.40	0.07	1.62	1.67	1.08	1.06	000
29126		A	Apply forearm splint	0.77	1.00	1.16	0.47	0.46	0.07	1.84	2.00	1.31	1.30	000
29130		A	Application of finger splint	0.50	0.43	0.46	0.18	0.17	0.06	0.99	1.02	0.74	0.73	000
29131		A	Application of finger splint	0.55	0.62	0.71	0.26	0.25	0.03	1.20	1.29	0.84	0.83	000
29200		A	Strapping of chest	0.65	0.61	0.69	0.35	0.34	0.04	1.30	1.38	1.04	1.03	000
29220		A	Strapping of low back	0.64	0.61	0.69	0.35	0.38	0.04	1.29	1.37	1.03	1.06	000
29240		A	Strapping of shoulder	0.71	0.67	0.81	0.38	0.37	0.06	1.44	1.58	1.15	1.14	000
29260		A	Strapping of elbow or wrist	0.55	0.65	0.72	0.36	0.33	0.05	1.25	1.32	0.96	0.93	000
29280		A	Strapping of hand or finger	0.51	0.66	0.77	0.37	0.33	0.03	1.20	1.31	0.91	0.87	000
29305		A	Application of hip cast	2.03	3.35	3.35	1.58	1.72	0.35	5.73	5.73	3.96	4.10	000
29325		A	Application of hip casts	2.32	3.66	3.57	1.73	1.90	0.40	6.38	6.29	4.45	4.62	000
29345		A	Application of long leg cast	1.40	1.65	1.74	0.93	1.03	0.24	3.29	3.38	2.57	2.67	000

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
29355		A	Application of long leg cast	1.53	1.61	1.69	0.93	1.07	0.26	3.40	3.48	2.72	2.86	000
29358		A	Apply long leg cast brace	1.43	2.03	2.06	0.92	1.05	0.25	3.71	3.74	2.60	2.73	000
29365		A	Application of long leg cast	1.18	1.56	1.64	0.84	0.92	0.20	2.94	3.02	2.22	2.30	000
29405		A	Apply short leg cast	0.86	1.19	1.21	0.65	0.70	0.14	2.19	2.21	1.65	1.70	000
29425		A	Apply short leg cast	1.01	1.22	1.23	0.65	0.72	0.15	2.38	2.39	1.81	1.88	000
29435		A	Apply short leg cast	1.18	1.52	1.55	0.80	0.90	0.20	2.90	2.93	2.18	2.28	000
29440		A	Addition of walker to cast	0.57	0.61	0.67	0.25	0.27	0.08	1.26	1.32	0.90	0.92	000
29445		A	Apply rigid leg cast	1.78	1.60	1.76	0.91	0.95	0.27	3.65	3.81	2.96	3.00	000
29450		A	Application of leg cast	2.08	1.50	1.48	0.84	1.03	0.27	3.85	3.83	3.19	3.38	000
29505		A	Application, long leg splint	0.69	1.05	1.15	0.44	0.45	0.08	1.82	1.92	1.21	1.22	000
29515		A	Application lower leg splint	0.73	0.95	0.89	0.45	0.46	0.09	1.77	1.71	1.27	1.28	000
29520		A	Strapping of hip	0.54	0.67	0.81	0.38	0.45	0.03	1.24	1.38	0.95	1.02	000
29530		A	Strapping of knee	0.57	0.65	0.76	0.36	0.34	0.05	1.27	1.38	0.98	0.96	000
29540		A	Strapping of ankle and/or ft	0.51	0.54	0.45	0.31	0.31	0.06	1.11	1.02	0.88	0.88	000
29550		A	Strapping of toes	0.47	0.56	0.46	0.30	0.29	0.06	1.09	0.99	0.83	0.82	000
29580		A	Application of paste boot	0.57	0.72	0.67	0.34	0.35	0.07	1.36	1.31	0.98	0.99	000
29590		A	Application of foot splint	0.76	0.59	0.53	0.26	0.28	0.09	1.44	1.38	1.11	1.13	000
29700		A	Removal/revision of cast	0.57	0.96	0.91	0.26	0.28	0.08	1.61	1.56	0.91	0.93	000
29705		A	Removal/revision of cast	0.76	0.76	0.81	0.36	0.38	0.13	1.65	1.70	1.25	1.27	000
29710		A	Removal/revision of cast	1.34	1.43	1.51	0.62	0.68	0.20	2.97	3.05	2.16	2.22	000
29715		A	Removal/revision of cast	0.94	1.12	1.16	0.40	0.40	0.09	2.15	2.19	1.43	1.43	000
29720		A	Repair of body cast	0.68	1.14	1.16	0.34	0.38	0.12	1.94	1.96	1.14	1.18	000
29730		A	Windowing of cast	0.75	0.75	0.80	0.34	0.35	0.12	1.62	1.67	1.21	1.22	000
29740		A	Wedging of cast	1.12	1.04	1.12	0.48	0.49	0.18	2.34	2.42	1.78	1.79	000
29750		A	Wedging of clubfoot cast	1.26	0.90	1.02	0.43	0.54	0.21	2.37	2.49	1.90	2.01	000
29800		A	Jaw arthroscopy/surgery	6.67	NA	NA	5.64	6.65	0.99	NA	NA	13.30	14.31	090
29804		A	Jaw arthroscopy/surgery	8.63	NA	NA	7.33	7.56	1.38	NA	NA	17.34	17.57	090
29805		A	Shoulder arthroscopy, dx	5.88	NA	NA	4.66	5.43	1.02	NA	NA	11.56	12.33	090
29806		A	Shoulder arthroscopy/surgery	14.85	NA	NA	9.22	10.70	2.49	NA	NA	26.56	28.04	090
29807		A	Shoulder arthroscopy/surgery	14.38	NA	NA	9.10	10.54	2.41	NA	NA	25.89	27.33	090
29819		A	Shoulder arthroscopy/surgery	7.61	NA	NA	5.56	6.50	1.32	NA	NA	14.49	15.43	090
29820		A	Shoulder arthroscopy/surgery	7.06	NA	NA	5.12	5.96	1.22	NA	NA	13.40	14.24	090
29821		A	Shoulder arthroscopy/surgery	7.71	NA	NA	5.58	6.51	1.33	NA	NA	14.62	15.55	090
29822		A	Shoulder arthroscopy/surgery	7.42	NA	NA	5.51	6.41	1.28	NA	NA	14.21	15.11	090
29823		A	Shoulder arthroscopy/surgery	8.16	NA	NA	5.96	6.92	1.41	NA	NA	15.53	16.49	090
29824		A	Shoulder arthroscopy/surgery	8.74	NA	NA	6.45	7.28	1.42	NA	NA	16.61	17.44	090
29825		A	Shoulder arthroscopy/surgery	7.61	NA	NA	5.57	6.48	1.32	NA	NA	14.50	15.41	090
29826		A	Shoulder arthroscopy/surgery	8.98	NA	NA	6.11	7.19	1.55	NA	NA	16.64	17.72	090
29827		A	Arthroscop rotator cuff repr	15.34	NA	NA	9.19	10.97	2.66	NA	NA	27.19	28.97	090
29830		A	Elbow arthroscopy	5.75	NA	NA	4.44	5.13	0.99	NA	NA	11.18	11.87	090
29834		A	Elbow arthroscopy/surgery	6.27	NA	NA	4.79	5.59	1.08	NA	NA	12.14	12.94	090
29835		A	Elbow arthroscopy/surgery	6.47	NA	NA	4.90	5.65	1.13	NA	NA	12.50	13.25	090
29836		A	Elbow arthroscopy/surgery	7.54	NA	NA	5.48	6.48	1.22	NA	NA	14.24	15.24	090
29837		A	Elbow arthroscopy/surgery	6.86	NA	NA	5.06	5.88	1.19	NA	NA	13.11	13.93	090
29838		A	Elbow arthroscopy/surgery	7.70	NA	NA	5.59	6.58	1.30	NA	NA	14.59	15.58	090
29840		A	Wrist arthroscopy	5.53	NA	NA	4.54	5.14	0.84	NA	NA	10.91	11.51	090
29843		A	Wrist arthroscopy/surgery	6.00	NA	NA	4.83	5.44	0.92	NA	NA	11.75	12.36	090
29844		A	Wrist arthroscopy/surgery	6.36	NA	NA	4.87	5.60	1.04	NA	NA	12.27	13.00	090
29845		A	Wrist arthroscopy/surgery	7.51	NA	NA	5.41	6.22	0.99	NA	NA	13.91	14.72	090
29846		A	Wrist arthroscopy/surgery	6.74	NA	NA	5.01	5.81	1.07	NA	NA	12.82	13.62	090
29847		A	Wrist arthroscopy/surgery	7.07	NA	NA	5.08	5.93	1.08	NA	NA	13.23	14.08	090
29848		A	Wrist endoscopy/surgery	6.18	NA	NA	5.20	5.52	0.86	NA	NA	12.24	12.56	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
29850		A	Knee arthroscopy/surgery	8.18	NA	NA	5.13	5.07	1.25	NA	NA	14.56	14.50	090
29851		A	Knee arthroscopy/surgery	13.08	NA	NA	8.16	9.41	2.34	NA	NA	23.58	24.83	090
29855		A	Tibial arthroscopy/surgery	10.60	NA	NA	7.25	8.41	1.84	NA	NA	19.69	20.85	090
29856		A	Tibial arthroscopy/surgery	14.12	NA	NA	8.58	10.17	2.39	NA	NA	25.09	26.68	090
29860		A	Hip arthroscopy, dx	8.79	NA	NA	6.11	6.76	1.36	NA	NA	16.26	16.91	090
29861		A	Hip arthroscopy/surgery	9.89	NA	NA	6.51	7.15	1.59	NA	NA	17.99	18.63	090
29862		A	Hip arthroscopy/surgery	10.89	NA	NA	7.48	8.31	1.62	NA	NA	19.99	20.82	090
29863		A	Hip arthroscopy/surgery	10.89	NA	NA	7.40	8.25	1.42	NA	NA	19.71	20.56	090
29866		A	Autgrft implnt, knee w/scope	14.38	NA	NA	9.36	10.88	2.39	NA	NA	26.13	27.65	090
29867		A	Allgrft implnt, knee w/scope	18.08	NA	NA	11.02	12.70	2.78	NA	NA	31.88	33.56	090
29868		A	Meniscal trnspl, knee w/scpe	24.79	NA	NA	13.64	16.04	4.35	NA	NA	42.78	45.18	090
29870		A	Knee arthroscopy, dx	5.06	NA	NA	4.11	4.70	0.85	NA	NA	10.02	10.61	090
29871		A	Knee arthroscopy/drainage	6.54	NA	NA	4.94	5.65	1.14	NA	NA	12.62	13.33	090
29873		A	Knee arthroscopy/surgery	5.99	NA	NA	5.52	6.32	1.04	NA	NA	12.55	13.35	090
29874		A	Knee arthroscopy/surgery	7.04	NA	NA	5.08	5.84	1.11	NA	NA	13.23	13.99	090
29875		A	Knee arthroscopy/surgery	6.30	NA	NA	4.83	5.61	1.09	NA	NA	12.22	13.00	090
29876		A	Knee arthroscopy/surgery	8.66	NA	NA	6.12	6.81	1.37	NA	NA	16.15	16.84	090
29877		A	Knee arthroscopy/surgery	8.09	NA	NA	5.88	6.54	1.28	NA	NA	15.25	15.91	090
29879		A	Knee arthroscopy/surgery	8.78	NA	NA	6.16	6.90	1.39	NA	NA	16.33	17.07	090
29880		A	Knee arthroscopy/surgery	9.24	NA	NA	6.36	7.13	1.47	NA	NA	17.07	17.84	090
29881		A	Knee arthroscopy/surgery	8.50	NA	NA	6.07	6.75	1.34	NA	NA	15.91	16.59	090
29882		A	Knee arthroscopy/surgery	9.39	NA	NA	6.39	7.04	1.50	NA	NA	17.28	17.93	090
29883		A	Knee arthroscopy/surgery	11.53	NA	NA	7.50	8.69	1.92	NA	NA	20.95	22.14	090
29884		A	Knee arthroscopy/surgery	8.07	NA	NA	5.90	6.52	1.27	NA	NA	15.24	15.86	090
29885		A	Knee arthroscopy/surgery	9.95	NA	NA	6.92	7.72	1.58	NA	NA	18.45	19.25	090
29886		A	Knee arthroscopy/surgery	8.28	NA	NA	5.97	6.65	1.30	NA	NA	15.55	16.23	090
29887		A	Knee arthroscopy/surgery	9.90	NA	NA	6.91	7.69	1.57	NA	NA	18.38	19.16	090
29888		A	Knee arthroscopy/surgery	14.06	NA	NA	8.17	9.72	2.41	NA	NA	24.64	26.19	090
29889		A	Knee arthroscopy/surgery	17.05	NA	NA	10.53	11.99	2.78	NA	NA	30.36	31.82	090
29891		A	Ankle arthroscopy/surgery	9.39	NA	NA	6.57	7.29	1.39	NA	NA	17.35	18.07	090
29892		A	Ankle arthroscopy/surgery	9.99	NA	NA	6.45	7.43	1.41	NA	NA	17.85	18.83	090
29893		A	Scope, plantar fasciotomy	5.96	8.75	6.91	4.59	4.15	0.63	15.34	13.50	11.18	10.74	090
29894		A	Ankle arthroscopy/surgery	7.20	NA	NA	4.61	5.27	1.15	NA	NA	12.96	13.62	090
29895		A	Ankle arthroscopy/surgery	6.98	NA	NA	4.45	5.23	1.11	NA	NA	12.54	13.32	090
29897		A	Ankle arthroscopy/surgery	7.17	NA	NA	4.88	5.65	1.17	NA	NA	13.22	13.99	090
29898		A	Ankle arthroscopy/surgery	8.31	NA	NA	5.19	5.96	1.28	NA	NA	14.78	15.55	090
29899		A	Ankle arthroscopy/surgery	15.13	NA	NA	9.12	10.21	2.40	NA	NA	26.65	27.74	090
29900		A	Mcp joint arthroscopy, dx	5.66	NA	NA	4.65	5.57	0.94	NA	NA	11.25	12.17	090
29901		A	Mcp joint arthroscopy, surg	6.37	NA	NA	5.45	6.07	1.06	NA	NA	12.88	13.50	090
29902		A	Mcp joint arthroscopy, surg	6.94	NA	NA	3.61	5.82	1.12	NA	NA	11.67	13.88	090
30000		A	Drainage of nose lesion	1.43	3.70	3.99	1.21	1.35	0.12	5.25	5.54	2.76	2.90	010
30020		A	Drainage of nose lesion	1.43	3.82	3.42	1.24	1.41	0.12	5.37	4.97	2.79	2.96	010
30100		A	Intranasal biopsy	0.94	2.39	2.08	0.68	0.79	0.07	3.40	3.09	1.69	1.80	000
30110		A	Removal of nose polyp(s)	1.63	3.59	3.34	1.30	1.50	0.14	5.36	5.11	3.07	3.27	010
30115		A	Removal of nose polyp(s)	4.34	NA	NA	5.40	5.69	0.41	NA	NA	10.15	10.44	090
30117		A	Removal of intranasal lesion	3.16	16.76	14.08	4.46	4.60	0.26	20.18	17.50	7.88	8.02	090
30118		A	Removal of intranasal lesion	9.74	NA	NA	7.61	8.82	0.78	NA	NA	18.13	19.34	090
30120		A	Revision of nose	5.26	6.74	6.57	4.81	5.72	0.52	12.52	12.35	10.59	11.50	090
30124		A	Removal of nose lesion	3.10	NA	NA	3.59	3.61	0.25	NA	NA	6.94	6.96	090
30125		A	Removal of nose lesion	7.15	NA	NA	6.91	7.98	0.63	NA	NA	14.69	15.76	090
30130		A	Excise inferior turbinate	3.37	NA	NA	5.21	5.51	0.31	NA	NA	8.89	9.19	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
30140		A	Resect inferior turbinate	3.42	NA	NA	6.47	6.28	0.35	NA	NA	10.24	10.05	090
30150		A	Partial removal of nose	9.37	NA	NA	8.38	10.38	0.93	NA	NA	18.68	20.68	090
30160		A	Removal of nose	9.81	NA	NA	7.99	9.68	0.88	NA	NA	18.68	20.37	090
30200		A	Injection treatment of nose	0.78	1.86	1.68	0.60	0.71	0.06	2.70	2.52	1.44	1.55	000
30210		A	Nasal sinus therapy	1.08	2.29	2.16	1.14	1.27	0.09	3.46	3.33	2.31	2.44	010
30220		A	Insert nasal septal button	1.54	5.36	4.52	1.27	1.47	0.12	7.02	6.18	2.93	3.13	010
30300		A	Remove nasal foreign body	1.04	4.09	4.50	1.76	1.88	0.08	5.21	5.62	2.88	3.00	010
30310		A	Remove nasal foreign body	1.96	NA	NA	2.68	3.00	0.16	NA	NA	4.80	5.12	010
30320		A	Remove nasal foreign body	4.51	NA	NA	5.85	6.76	0.39	NA	NA	10.75	11.66	090
30400		R	Reconstruction of nose	10.46	NA	NA	13.49	15.02	1.04	NA	NA	24.99	26.52	090
30410		R	Reconstruction of nose	13.60	NA	NA	14.12	17.35	1.42	NA	NA	29.14	32.37	090
30420		R	Reconstruction of nose	16.50	NA	NA	14.47	17.09	1.46	NA	NA	32.43	35.05	090
30430		R	Revision of nose	7.84	NA	NA	12.60	15.20	0.77	NA	NA	21.21	23.81	090
30435		R	Revision of nose	12.33	NA	NA	14.29	18.13	1.22	NA	NA	27.84	31.68	090
30450		R	Revision of nose	19.26	NA	NA	15.82	20.42	1.96	NA	NA	37.04	41.64	090
30460		A	Revision of nose	10.20	NA	NA	7.05	9.24	1.03	NA	NA	18.28	20.47	090
30462		A	Revision of nose	20.04	NA	NA	14.04	18.74	2.53	NA	NA	36.61	41.31	090
30465		A	Repair nasal stenosis	12.12	NA	NA	10.08	11.52	1.06	NA	NA	23.26	24.70	090
30520		A	Repair of nasal septum	7.63	NA	NA	6.88	6.73	0.46	NA	NA	14.97	14.82	090
30540		A	Repair nasal defect	7.74	NA	NA	6.92	8.71	0.67	NA	NA	15.33	17.12	090
30545		A	Repair nasal defect	11.42	NA	NA	9.88	11.42	1.70	NA	NA	23.00	24.54	090
30560		A	Release of nasal adhesions	1.26	4.88	4.81	1.84	2.07	0.10	6.24	6.17	3.20	3.43	010
30580		A	Repair upper jaw fistula	6.68	8.13	7.88	4.66	5.52	0.89	15.70	15.45	12.23	13.09	090
30600		A	Repair mouth/nose fistula	6.01	7.43	7.51	4.00	4.77	0.70	14.14	14.22	10.71	11.48	090
30620		A	Intranasal reconstruction	5.96	NA	NA	7.98	8.64	0.57	NA	NA	14.51	15.17	090
30630		A	Repair nasal septum defect	7.11	NA	NA	6.96	7.72	0.61	NA	NA	14.68	15.44	090
30801		A	Ablate inf turbinate, superf	1.09	3.98	4.10	1.94	1.93	0.09	5.16	5.28	3.12	3.11	010
30802		A	Cauterization, inner nose	2.03	4.55	4.60	2.27	2.35	0.16	6.74	6.79	4.46	4.54	010
30901		A	Control of nosebleed	1.21	1.19	1.32	0.27	0.31	0.11	2.51	2.64	1.59	1.63	000
30903		A	Control of nosebleed	1.54	3.04	2.80	0.37	0.47	0.13	4.71	4.47	2.04	2.14	000
30905		A	Control of nosebleed	1.97	3.69	3.56	0.45	0.68	0.17	5.83	5.70	2.59	2.82	000
30906		A	Repeat control of nosebleed	2.45	3.92	3.91	0.64	1.06	0.20	6.57	6.56	3.29	3.71	000
30915		A	Ligation, nasal sinus artery	7.31	NA	NA	5.71	6.46	0.58	NA	NA	13.60	14.35	090
30920		A	Ligation, upper jaw artery	10.97	NA	NA	7.97	8.74	0.80	NA	NA	19.74	20.51	090
30930		A	Ther fx, nasal inf turbinate	1.26	NA	NA	1.50	1.59	0.12	NA	NA	2.88	2.97	010
31000		A	Irrigation, maxillary sinus	1.15	2.98	2.88	1.22	1.36	0.09	4.22	4.12	2.46	2.60	010
31002		A	Irrigation, sphenoid sinus	1.91	NA	NA	2.49	3.06	0.15	NA	NA	4.55	5.12	010
31020		A	Exploration, maxillary sinus	2.94	7.98	8.41	5.11	5.18	0.29	11.21	11.64	8.34	8.41	090
31030		A	Exploration, maxillary sinus	5.91	9.65	11.06	5.93	6.49	0.60	16.16	17.57	12.44	13.00	090
31032		A	Explore sinus, remove polyps	6.56	NA	NA	6.38	7.03	0.59	NA	NA	13.53	14.18	090
31040		A	Exploration behind upper jaw	9.59	NA	NA	7.13	9.17	0.87	NA	NA	17.59	19.63	090
31050		A	Exploration, sphenoid sinus	5.27	NA	NA	6.03	6.29	0.49	NA	NA	11.79	12.05	090
31051		A	Sphenoid sinus surgery	7.10	NA	NA	7.58	8.09	0.62	NA	NA	15.30	15.81	090
31070		A	Exploration of frontal sinus	4.27	NA	NA	5.61	5.87	0.38	NA	NA	10.26	10.52	090
31075		A	Exploration of frontal sinus	9.33	NA	NA	8.36	9.41	0.75	NA	NA	18.44	19.49	090
31080		A	Removal of frontal sinus	12.46	NA	NA	10.25	12.74	1.23	NA	NA	23.94	26.43	090
31081		A	Removal of frontal sinus	13.91	NA	NA	14.48	14.15	2.46	NA	NA	30.85	30.52	090
31084		A	Removal of frontal sinus	14.67	NA	NA	11.64	13.07	1.19	NA	NA	27.50	28.93	090
31085		A	Removal of frontal sinus	15.36	NA	NA	12.67	13.67	1.72	NA	NA	29.75	30.75	090
31086		A	Removal of frontal sinus	14.08	NA	NA	11.48	12.86	1.07	NA	NA	26.63	28.01	090
31087		A	Removal of frontal sinus	14.31	NA	NA	10.51	12.06	1.44	NA	NA	26.26	27.81	090
31090		A	Exploration of sinuses	10.78	NA	NA	12.11	12.47	0.94	NA	NA	23.83	24.19	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
31200		A	Removal of ethmoid sinus	4.96	NA	NA	7.32	8.76	0.29	NA	NA	12.57	14.01	090
31201		A	Removal of ethmoid sinus	8.42	NA	NA	8.11	8.93	0.82	NA	NA	17.35	18.17	090
31205		A	Removal of ethmoid sinus	10.40	NA	NA	9.33	11.27	0.67	NA	NA	20.40	22.34	090
31225		A	Removal of upper jaw	26.34	NA	NA	16.42	17.51	1.59	NA	NA	44.35	45.44	090
31230		A	Removal of upper jaw	30.46	NA	NA	17.08	18.84	1.77	NA	NA	49.31	51.07	090
31231		A	Nasal endoscopy, dx	1.10	3.30	3.37	0.68	0.83	0.09	4.49	4.56	1.87	2.02	000
31233		A	Nasal/sinus endoscopy, dx	2.18	3.89	4.21	0.97	1.35	0.20	6.27	6.59	3.35	3.73	000
31235		A	Nasal/sinus endoscopy, dx	2.64	4.24	4.75	1.10	1.57	0.26	7.14	7.65	4.00	4.47	000
31237		A	Nasal/sinus endoscopy, surg	2.98	4.46	5.02	1.20	1.72	0.28	7.72	8.28	4.46	4.98	000
31238		A	Nasal/sinus endoscopy, surg	3.26	4.38	5.03	1.27	1.89	0.27	7.91	8.56	4.80	5.42	000
31239		A	Nasal/sinus endoscopy, surg	9.19	NA	NA	6.14	7.55	0.62	NA	NA	15.95	17.36	010
31240		A	Nasal/sinus endoscopy, surg	2.61	NA	NA	1.10	1.58	0.24	NA	NA	3.95	4.43	000
31254		A	Revision of ethmoid sinus	4.64	NA	NA	1.66	2.56	0.45	NA	NA	6.75	7.65	000
31255		A	Removal of ethmoid sinus	6.95	NA	NA	2.29	3.66	0.73	NA	NA	9.97	11.34	000
31256		A	Exploration maxillary sinus	3.29	NA	NA	1.28	1.91	0.33	NA	NA	4.90	5.53	000
31267		A	Endoscopy, maxillary sinus	5.45	NA	NA	1.88	2.95	0.55	NA	NA	7.88	8.95	000
31276		A	Sinus endoscopy, surgical	8.84	NA	NA	2.80	4.55	0.92	NA	NA	12.56	14.31	000
31287		A	Nasal/sinus endoscopy, surg	3.91	NA	NA	1.45	2.21	0.39	NA	NA	5.75	6.51	000
31288		A	Nasal/sinus endoscopy, surg	4.57	NA	NA	1.63	2.52	0.46	NA	NA	6.66	7.55	000
31290		A	Nasal/sinus endoscopy, surg	18.46	NA	NA	7.82	11.02	1.40	NA	NA	27.68	30.88	010
31291		A	Nasal/sinus endoscopy, surg	19.41	NA	NA	8.42	11.49	1.68	NA	NA	29.51	32.58	010
31292		A	Nasal/sinus endoscopy, surg	15.75	NA	NA	7.06	9.75	1.21	NA	NA	24.02	26.71	010
31293		A	Nasal/sinus endoscopy, surg	17.32	NA	NA	7.66	10.47	1.28	NA	NA	26.26	29.07	010
31294		A	Nasal/sinus endoscopy, surg	20.16	NA	NA	8.52	11.81	1.53	NA	NA	30.21	33.50	010
31300		A	Removal of larynx lesion	15.63	NA	NA	13.25	14.58	1.17	NA	NA	30.05	31.38	090
31320		A	Diagnostic incision, larynx	5.55	NA	NA	9.07	10.02	0.46	NA	NA	15.08	16.03	090
31360		A	Removal of larynx	27.23	NA	NA	16.41	16.68	1.38	NA	NA	45.02	45.29	090
31365		A	Removal of larynx	34.85	NA	NA	18.52	19.95	1.97	NA	NA	55.34	56.77	090
31367		A	Partial removal of larynx	27.11	NA	NA	19.04	21.22	1.78	NA	NA	47.93	50.11	090
31368		A	Partial removal of larynx	33.73	NA	NA	22.36	24.76	2.20	NA	NA	58.29	60.69	090
31370		A	Partial removal of larynx	27.11	NA	NA	19.92	21.72	1.74	NA	NA	48.77	50.57	090
31375		A	Partial removal of larynx	25.61	NA	NA	18.36	19.92	1.63	NA	NA	45.60	47.16	090
31380		A	Partial removal of larynx	25.11	NA	NA	18.05	20.01	1.70	NA	NA	44.86	46.82	090
31382		A	Partial removal of larynx	28.11	NA	NA	20.22	21.31	1.67	NA	NA	50.00	51.09	090
31390		A	Removal of larynx & pharynx	38.72	NA	NA	22.23	23.90	2.23	NA	NA	63.18	64.85	090
31395		A	Reconstruct larynx & pharynx	43.34	NA	NA	26.33	27.87	2.48	NA	NA	72.15	73.69	090
31400		A	Revision of larynx	11.40	NA	NA	11.27	13.18	0.83	NA	NA	23.50	25.41	090
31420		A	Removal of epiglottis	11.25	NA	NA	7.70	9.10	0.83	NA	NA	19.78	21.18	090
31500		A	Insert emergency airway	2.33	NA	NA	0.42	0.52	0.17	NA	NA	2.92	3.02	000
31502		A	Change of windpipe airway	0.65	0.16	0.27	0.20	0.26	0.05	0.86	0.97	0.90	0.96	000
31505		A	Diagnostic laryngoscopy	0.61	1.32	1.42	0.54	0.59	0.05	1.98	2.08	1.20	1.25	000
31510		A	Laryngoscopy with biopsy	1.92	2.95	3.22	0.89	1.16	0.16	5.03	5.30	2.97	3.24	000
31511		A	Remove foreign body, larynx	2.16	2.72	3.03	0.91	1.02	0.19	5.07	5.38	3.26	3.37	000
31512		A	Removal of larynx lesion	2.07	2.69	3.08	0.93	1.25	0.18	4.94	5.33	3.18	3.50	000
31513		A	Injection into vocal cord	2.10	NA	NA	0.95	1.33	0.17	NA	NA	3.22	3.60	000
31515		A	Laryngoscopy for aspiration	1.80	3.04	3.42	0.82	1.00	0.14	4.98	5.36	2.76	2.94	000
31520		A	Dx laryngoscopy, newborn	2.56	NA	NA	1.07	1.44	0.20	NA	NA	3.83	4.20	000
31525		A	Dx laryngoscopy excl nb	2.63	3.18	3.53	1.08	1.52	0.21	6.02	6.37	3.92	4.36	000
31526		A	Dx laryngoscopy w/oper scope	2.57	NA	NA	1.08	1.56	0.21	NA	NA	3.86	4.34	000
31527		A	Laryngoscopy for treatment	3.27	NA	NA	1.26	1.73	0.26	NA	NA	4.79	5.26	000
31528		A	Laryngoscopy and dilation	2.37	NA	NA	0.95	1.33	0.19	NA	NA	3.51	3.89	000
31529		A	Laryngoscopy and dilation	2.68	NA	NA	1.07	1.55	0.22	NA	NA	3.97	4.45	000

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
31530		A	Laryngoscopy w/fb removal	3.38	NA	NA	1.26	1.79	0.29	NA	NA	4.93	5.46	000
31531		A	Laryngoscopy w/fb & op scope	3.58	NA	NA	1.36	2.05	0.29	NA	NA	5.23	5.92	000
31535		A	Laryngoscopy w/biopsy	3.16	NA	NA	1.24	1.81	0.26	NA	NA	4.66	5.23	000
31536		A	Laryngoscopy w/bx & op scope	3.55	NA	NA	1.35	2.03	0.29	NA	NA	5.19	5.87	000
31540		A	Laryngoscopy w/exc of tumor	4.12	NA	NA	1.51	2.29	0.33	NA	NA	5.96	6.74	000
31541		A	Larynscop w/tumr exc + scope	4.52	NA	NA	1.62	2.50	0.37	NA	NA	6.51	7.39	000
31545		A	Remove vc lesion w/scope	6.30	NA	NA	2.14	3.15	0.37	NA	NA	8.81	9.82	000
31546		A	Remove vc lesion scope/graft	9.73	NA	NA	3.62	4.64	0.78	NA	NA	14.13	15.15	000
31560		A	Laryngoscop w/arytenoidectom	5.45	NA	NA	1.83	2.83	0.43	NA	NA	7.71	8.71	000
31561		A	Larynscop, remve cart + scop	5.99	NA	NA	1.97	3.03	0.49	NA	NA	8.45	9.51	000
31570		A	Laryngoscope w/vc inj	3.86	3.88	5.24	1.43	2.15	0.31	8.05	9.41	5.60	6.32	000
31571		A	Laryngoscop w/vc inj + scope	4.26	NA	NA	1.55	2.35	0.35	NA	NA	6.16	6.96	000
31575		A	Diagnostic laryngoscopy	1.10	1.54	1.82	0.68	0.84	0.09	2.73	3.01	1.87	2.03	000
31576		A	Laryngoscopy with biopsy	1.97	3.24	3.56	0.92	1.20	0.14	5.35	5.67	3.03	3.31	000
31577		A	Remove foreign body, larynx	2.47	3.19	3.63	1.07	1.42	0.21	5.87	6.31	3.75	4.10	000
31578		A	Removal of larynx lesion	2.84	3.61	4.12	1.16	1.43	0.23	6.68	7.19	4.23	4.50	000
31579		A	Diagnostic laryngoscopy	2.26	2.59	3.49	1.00	1.36	0.18	5.03	5.93	3.44	3.80	000
31580		A	Revision of larynx	14.38	NA	NA	13.18	15.27	1.00	NA	NA	28.56	30.65	090
31582		A	Revision of larynx	22.73	NA	NA	19.99	24.40	1.75	NA	NA	44.47	48.88	090
31584		A	Treat larynx fracture	20.27	NA	NA	13.86	17.12	1.71	NA	NA	35.84	39.10	090
31587		A	Revision of larynx	15.06	NA	NA	7.74	8.90	0.97	NA	NA	23.77	24.93	090
31588		A	Revision of larynx	14.48	NA	NA	11.11	13.02	1.06	NA	NA	26.65	28.56	090
31590		A	Reinnervate larynx	7.53	NA	NA	11.97	14.68	0.84	NA	NA	20.34	23.05	090
31595		A	Larynx nerve surgery	8.69	NA	NA	8.77	10.13	0.68	NA	NA	18.14	19.50	090
31600		A	Incision of windpipe	7.17	NA	NA	2.16	2.94	0.80	NA	NA	10.13	10.91	000
31601		A	Incision of windpipe	4.44	NA	NA	1.58	2.20	0.40	NA	NA	6.42	7.04	000
31603		A	Incision of windpipe	4.14	NA	NA	1.09	1.56	0.44	NA	NA	5.67	6.14	000
31605		A	Incision of windpipe	3.57	NA	NA	0.81	1.10	0.40	NA	NA	4.78	5.07	000
31610		A	Incision of windpipe	9.23	NA	NA	7.02	7.97	0.79	NA	NA	17.04	17.99	090
31611		A	Surgery/speech prosthesis	5.87	NA	NA	6.36	6.90	0.46	NA	NA	12.69	13.23	090
31612		A	Puncture/clear windpipe	0.91	1.06	1.09	0.24	0.32	0.08	2.05	2.08	1.23	1.31	000
31613		A	Repair windpipe opening	4.58	NA	NA	5.73	5.94	0.42	NA	NA	10.73	10.94	090
31614		A	Repair windpipe opening	8.39	NA	NA	8.70	8.73	0.58	NA	NA	17.67	17.70	090
31615		A	Visualization of windpipe	2.09	2.18	2.50	0.93	1.13	0.16	4.43	4.75	3.18	3.38	000
31620		A	Endobronchial us add-on	1.40	5.98	5.74	0.33	0.50	0.11	7.49	7.25	1.84	2.01	ZZZ
31622		A	Dx bronchoscope/wash	2.78	5.21	5.56	0.88	1.02	0.18	8.17	8.52	3.84	3.98	000
31623		A	Dx bronchoscope/brush	2.88	5.96	6.32	0.88	1.01	0.13	8.97	9.33	3.89	4.02	000
31624		A	Dx bronchoscope/lavage	2.88	5.32	5.67	0.88	1.01	0.13	8.33	8.68	3.89	4.02	000
31625		A	Bronchoscopy w/biopsy(s)	3.36	5.46	5.74	1.00	1.16	0.18	9.00	9.28	4.54	4.70	000
31628		A	Bronchoscopy/lung bx, each	3.80	6.93	7.01	1.08	1.25	0.18	10.91	10.99	5.06	5.23	000
31629		A	Bronchoscopy/needle bx, each	4.09	11.96	13.71	1.15	1.34	0.16	16.21	17.96	5.40	5.59	000
31630		A	Bronchoscopy dilate/fx repr	3.81	NA	NA	1.23	1.60	0.32	NA	NA	5.36	5.73	000
31631		A	Bronchoscopy, dilate w/stent	4.36	NA	NA	1.38	1.67	0.34	NA	NA	6.08	6.37	000
31632		A	Bronchoscopy/lung bx, addll	1.03	0.85	0.82	0.23	0.29	0.18	2.06	2.03	1.44	1.50	ZZZ
31633		A	Bronchoscopy/needle bx addll	1.32	0.98	0.94	0.30	0.38	0.16	2.46	2.42	1.78	1.86	ZZZ
31635		A	Bronchoscopy w/fb removal	3.67	5.16	5.89	1.11	1.35	0.24	9.07	9.80	5.02	5.26	000
31636		A	Bronchoscopy, bronch stents	4.30	NA	NA	1.35	1.67	0.31	NA	NA	5.96	6.28	000
31637		A	Bronchoscopy, stent add-on	1.58	NA	NA	0.41	0.52	0.13	NA	NA	2.12	2.23	ZZZ
31638		A	Bronchoscopy, revise stent	4.88	NA	NA	1.53	1.87	0.22	NA	NA	6.63	6.97	000
31640		A	Bronchoscopy w/tumor excise	4.93	NA	NA	1.50	1.94	0.46	NA	NA	6.89	7.33	000
31641		A	Bronchoscopy, treat blockage	5.02	NA	NA	1.46	1.78	0.35	NA	NA	6.83	7.15	000

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
31643		A	Diag bronchoscope/catheter	3.49	NA	NA	1.03	1.18	0.20	NA	NA	4.72	4.87	000
31645		A	Bronchoscopy, clear airways	3.16	4.71	5.04	0.95	1.08	0.16	8.03	8.36	4.27	4.40	000
31646		A	Bronchoscopy, reclear airway	2.72	4.43	4.76	0.84	0.96	0.14	7.29	7.62	3.70	3.82	000
31656		A	Bronchoscopy, inj for x-ray	2.17	5.29	6.81	0.64	0.78	0.15	7.61	9.13	2.96	3.10	000
31700		A	Insertion of airway catheter	1.34	2.29	2.19	0.67	0.68	0.08	3.71	3.61	2.09	2.10	000
31708		A	Instill airway contrast dye	1.41	1.27	1.85	0.42	0.45	0.07	2.75	3.33	1.90	1.93	000
31710		A	Insertion of airway catheter	1.30	NA	NA	0.45	0.42	0.12	NA	NA	1.87	1.84	000
31715		A	Injection for bronchus x-ray	1.11	NA	NA	0.29	0.33	0.07	NA	NA	1.47	1.51	000
31717		A	Bronchial brush biopsy	2.12	5.81	7.66	0.74	0.78	0.14	8.07	9.92	3.00	3.04	000
31720		A	Clearance of airways	1.06	0.25	0.31	0.25	0.31	0.07	1.38	1.44	1.38	1.44	000
31725		A	Clearance of airways	1.96	0.44	0.60	0.44	0.55	0.14	2.54	2.70	2.54	2.65	000
31730		A	Intro, windpipe wire/tube	2.85	25.49	8.02	0.71	0.93	0.21	28.55	11.08	3.77	3.99	000
31750		A	Repair of windpipe	15.11	NA	NA	15.93	17.18	1.05	NA	NA	32.09	33.34	090
31755		A	Repair of windpipe	17.05	NA	NA	21.88	23.91	1.29	NA	NA	40.22	42.25	090
31760		A	Repair of windpipe	23.28	NA	NA	9.87	10.52	2.94	NA	NA	36.09	36.74	090
31766		A	Reconstruction of windpipe	31.52	NA	NA	11.44	13.13	4.52	NA	NA	47.48	49.17	090
31770		A	Repair/graft of bronchus	23.44	NA	NA	9.02	9.96	2.83	NA	NA	35.29	36.23	090
31775		A	Reconstruct bronchus	24.46	NA	NA	8.87	11.08	3.01	NA	NA	36.34	38.55	090
31780		A	Reconstruct windpipe	19.62	NA	NA	7.96	10.30	1.65	NA	NA	29.23	31.57	090
31781		A	Reconstruct windpipe	24.72	NA	NA	9.17	11.41	2.24	NA	NA	36.13	38.37	090
31785		A	Remove windpipe lesion	18.25	NA	NA	6.80	9.36	1.59	NA	NA	26.64	29.20	090
31786		A	Remove windpipe lesion	25.29	NA	NA	9.81	12.30	3.29	NA	NA	38.39	40.88	090
31800		A	Repair of windpipe injury	8.05	NA	NA	8.31	9.03	0.79	NA	NA	17.15	17.87	090
31805		A	Repair of windpipe injury	13.29	NA	NA	6.45	7.04	1.82	NA	NA	21.56	22.15	090
31820		A	Closure of windpipe lesion	4.54	5.37	5.60	2.94	3.48	0.38	10.29	10.52	7.86	8.40	090
31825		A	Repair of windpipe defect	6.92	6.69	7.43	3.93	5.03	0.53	14.14	14.88	11.38	12.48	090
31830		A	Revise windpipe scar	4.49	5.54	5.72	3.29	3.82	0.44	10.47	10.65	8.22	8.75	090
32000		A	Drainage of chest	1.54	2.46	2.91	0.46	0.48	0.08	4.08	4.53	2.08	2.10	000
32002		A	Treatment of collapsed lung	2.19	2.94	3.15	1.03	1.05	0.12	5.25	5.46	3.34	3.36	000
32005		A	Treat lung lining chemically	2.19	5.12	6.13	0.59	0.67	0.23	7.54	8.55	3.01	3.09	000
32019		A	Insert pleural catheter	4.17	15.73	18.95	1.47	1.61	0.42	20.32	23.54	6.06	6.20	000
32020		A	Insertion of chest tube	3.97	NA	NA	1.15	1.30	0.43	NA	NA	5.55	5.70	000
32035		A	Exploration of chest	11.13	NA	NA	5.99	5.90	1.26	NA	NA	18.38	18.29	090
32036		A	Exploration of chest	12.14	NA	NA	6.31	6.42	1.43	NA	NA	19.88	19.99	090
32095		A	Biopsy through chest wall	10.03	NA	NA	5.31	5.36	1.22	NA	NA	16.56	16.61	090
32100		A	Exploration/biopsy of chest	16.04	NA	NA	7.19	7.68	2.23	NA	NA	25.46	25.95	090
32110		A	Explore/repair chest	25.11	NA	NA	10.13	10.60	3.21	NA	NA	38.45	38.92	090
32120		A	Re-exploration of chest	14.23	NA	NA	7.02	7.07	1.63	NA	NA	22.88	22.93	090
32124		A	Explore chest free adhesions	15.29	NA	NA	7.20	7.22	1.89	NA	NA	24.38	24.40	090
32140		A	Removal of lung lesion(s)	16.50	NA	NA	7.58	7.67	1.96	NA	NA	26.04	26.13	090
32141		A	Remove/treat lung lesions	17.14	NA	NA	7.80	7.63	2.00	NA	NA	26.94	26.77	090
32150		A	Removal of lung lesion(s)	16.66	NA	NA	7.64	7.63	2.00	NA	NA	26.30	26.29	090
32151		A	Remove lung foreign body	16.78	NA	NA	9.04	8.28	2.03	NA	NA	27.85	27.09	090
32160		A	Open chest heart massage	13.00	NA	NA	5.96	5.45	1.31	NA	NA	20.27	19.76	090
32200		A	Drain, open, lung lesion	18.42	NA	NA	9.10	8.75	2.13	NA	NA	29.65	29.30	090
32201		A	Drain, percut, lung lesion	3.99	20.79	20.77	1.40	1.33	0.24	25.02	25.00	5.63	5.56	000
32215		A	Treat chest lining	12.90	NA	NA	6.48	6.81	1.68	NA	NA	21.06	21.39	090
32220		A	Release of lung	26.31	NA	NA	12.24	12.80	3.56	NA	NA	42.11	42.67	090
32225		A	Partial release of lung	16.59	NA	NA	7.61	7.66	2.06	NA	NA	26.26	26.31	090
32310		A	Removal of chest lining	15.13	NA	NA	7.05	7.32	1.99	NA	NA	24.17	24.44	090
32320		A	Free/remove chest lining	26.96	NA	NA	11.73	12.08	3.51	NA	NA	42.20	42.55	090
32400		A	Needle biopsy chest lining	1.76	2.21	2.15	0.55	0.55	0.10	4.07	4.01	2.41	2.41	000

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
32402		A	Open biopsy chest lining	8.85	NA	NA	4.84	5.05	1.07	NA	NA	14.76	14.97	090
32405		A	Biopsy, lung or mediastinum	1.93	0.68	0.67	0.68	0.64	0.11	2.72	2.71	2.72	2.68	000
32420		A	Puncture/clear lung	2.18	NA	NA	0.74	0.70	0.12	NA	NA	3.04	3.00	000
32440		A	Removal of lung	27.11	NA	NA	11.21	12.50	3.68	NA	NA	42.00	43.29	090
32442		A	Sleeve pneumonectomy	37.74	NA	NA	14.53	14.73	3.84	NA	NA	56.11	56.31	090
32445		A	Removal of lung	40.73	NA	NA	16.04	14.59	3.71	NA	NA	60.48	59.03	090
32480		A	Partial removal of lung	25.65	NA	NA	10.46	11.68	3.49	NA	NA	39.60	40.82	090
32482		A	Bilobectomy	27.22	NA	NA	11.30	12.54	3.66	NA	NA	42.18	43.42	090
32484		A	Segmentectomy	22.67	NA	NA	9.74	10.99	3.03	NA	NA	35.44	36.69	090
32486		A	Sleeve lobectomy	31.72	NA	NA	12.98	13.21	3.51	NA	NA	48.21	48.44	090
32488		A	Completion pneumonectomy	32.69	NA	NA	13.02	13.62	3.80	NA	NA	49.51	50.11	090
32491		R	Lung volume reduction	25.03	NA	NA	10.81	12.20	2.98	NA	NA	38.82	40.21	090
32500		A	Partial removal of lung	24.42	NA	NA	10.53	11.93	3.25	NA	NA	38.20	39.60	090
32501		A	Repair bronchus add-on	4.68	NA	NA	1.38	1.50	0.65	NA	NA	6.71	6.83	ZZZ
32503		A	Resect apical lung tumor	31.55	NA	NA	12.41	14.44	4.37	NA	NA	48.33	50.36	090
32504		A	Resect apical lung tum/chest	36.35	NA	NA	13.85	16.00	5.07	NA	NA	55.27	57.42	090
32540		A	Removal of lung lesion	23.68	NA	NA	10.38	9.84	2.07	NA	NA	36.13	35.59	090
32601		A	Thoracoscopy, diagnostic	5.45	NA	NA	2.13	2.30	0.80	NA	NA	8.38	8.55	000
32602		A	Thoracoscopy, diagnostic	5.95	NA	NA	2.27	2.47	0.87	NA	NA	9.09	9.29	000
32603		A	Thoracoscopy, diagnostic	7.80	NA	NA	3.01	3.03	1.14	NA	NA	11.95	11.97	000
32604		A	Thoracoscopy, diagnostic	8.77	NA	NA	3.10	3.37	1.25	NA	NA	13.12	13.39	000
32605		A	Thoracoscopy, diagnostic	6.92	NA	NA	2.59	2.83	1.00	NA	NA	10.51	10.75	000
32606		A	Thoracoscopy, diagnostic	8.39	NA	NA	3.05	3.27	1.22	NA	NA	12.66	12.88	000
32650		A	Thoracoscopy, surgical	10.73	NA	NA	5.36	6.43	1.58	NA	NA	17.67	18.74	090
32651		A	Thoracoscopy, surgical	16.28	NA	NA	6.99	7.19	1.86	NA	NA	25.13	25.33	090
32652		A	Thoracoscopy, surgical	23.34	NA	NA	9.43	9.99	2.72	NA	NA	35.49	36.05	090
32653		A	Thoracoscopy, surgical	19.86	NA	NA	7.60	7.14	1.88	NA	NA	29.34	28.88	090
32654		A	Thoracoscopy, surgical	18.49	NA	NA	7.37	7.51	1.63	NA	NA	27.49	27.63	090
32655		A	Thoracoscopy, surgical	14.95	NA	NA	6.64	7.11	1.89	NA	NA	23.48	23.95	090
32656		A	Thoracoscopy, surgical	13.14	NA	NA	6.07	7.49	1.89	NA	NA	21.10	22.52	090
32657		A	Thoracoscopy, surgical	14.54	NA	NA	6.52	7.41	1.99	NA	NA	23.05	23.94	090
32658		A	Thoracoscopy, surgical	11.61	NA	NA	5.68	6.95	1.69	NA	NA	18.98	20.25	090
32659		A	Thoracoscopy, surgical	11.82	NA	NA	6.01	7.11	1.62	NA	NA	19.45	20.55	090
32660		A	Thoracoscopy, surgical	17.65	NA	NA	7.59	9.03	2.08	NA	NA	27.32	28.76	090
32661		A	Thoracoscopy, surgical	13.23	NA	NA	6.30	7.43	1.92	NA	NA	21.45	22.58	090
32662		A	Thoracoscopy, surgical	17.00	NA	NA	7.28	8.46	2.17	NA	NA	26.45	27.63	090
32663		A	Thoracoscopy, surgical	19.96	NA	NA	8.99	10.34	2.72	NA	NA	31.67	33.02	090
32664		A	Thoracoscopy, surgical	14.18	NA	NA	6.48	7.36	2.32	NA	NA	22.98	23.86	090
32665		A	Thoracoscopy, surgical	17.37	NA	NA	7.66	8.03	2.15	NA	NA	27.18	27.55	090
32800		A	Repair lung hernia	15.56	NA	NA	7.14	7.36	1.98	NA	NA	24.68	24.90	090
32810		A	Close chest after drainage	14.80	NA	NA	7.16	7.45	1.93	NA	NA	23.89	24.18	090
32815		A	Close bronchial fistula	37.94	NA	NA	14.13	11.78	3.27	NA	NA	55.34	52.99	090
32820		A	Reconstruct injured chest	22.27	NA	NA	11.58	12.05	2.52	NA	NA	36.37	36.84	090
32851		A	Lung transplant, single	40.72	NA	NA	21.07	26.07	5.56	NA	NA	67.35	72.35	090
32852		A	Lung transplant with bypass	44.37	NA	NA	24.10	30.97	6.00	NA	NA	74.47	81.34	090
32853		A	Lung transplant, double	49.89	NA	NA	23.44	29.74	7.05	NA	NA	80.38	86.68	090
32854		A	Lung transplant with bypass	53.60	NA	NA	26.89	32.85	7.20	NA	NA	87.69	93.65	090
32900		A	Removal of rib(s)	23.66	NA	NA	9.89	9.91	2.93	NA	NA	36.48	36.50	090
32905		A	Revise & repair chest wall	23.13	NA	NA	9.72	10.05	3.15	NA	NA	36.00	36.33	090
32906		A	Revise & repair chest wall	29.14	NA	NA	11.47	11.94	3.97	NA	NA	44.58	45.05	090
32940		A	Revision of lung	21.18	NA	NA	8.72	9.31	2.88	NA	NA	32.78	33.37	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
32960		A	Therapeutic pneumothorax	1.84	1.65	1.72	0.70	0.60	0.16	3.65	3.72	2.70	2.60	000
32997		A	Total lung lavage	5.99	NA	NA	1.50	1.82	0.55	NA	NA	8.04	8.36	000
33010		A	Drainage of heart sac	2.24	NA	NA	1.05	0.85	0.14	NA	NA	3.43	3.23	000
33011		A	Repeat drainage of heart sac	2.24	NA	NA	1.13	0.89	0.15	NA	NA	3.52	3.28	000
33015		A	Incision of heart sac	8.41	NA	NA	5.15	5.01	0.65	NA	NA	14.21	14.07	090
33020		A	Incision of heart sac	14.84	NA	NA	6.59	6.75	1.79	NA	NA	23.22	23.38	090
33025		A	Incision of heart sac	13.62	NA	NA	6.04	6.29	1.80	NA	NA	21.46	21.71	090
33030		A	Partial removal of heart sac	22.23	NA	NA	9.35	9.50	2.83	NA	NA	34.41	34.56	090
33031		A	Partial removal of heart sac	25.27	NA	NA	10.10	10.07	3.13	NA	NA	38.50	38.47	090
33050		A	Removal of heart sac lesion	16.81	NA	NA	7.70	7.82	2.14	NA	NA	26.65	26.77	090
33120		A	Removal of heart lesion	27.29	NA	NA	10.90	11.43	3.69	NA	NA	41.88	42.41	090
33130		A	Removal of heart lesion	24.01	NA	NA	9.50	9.98	3.00	NA	NA	36.51	36.99	090
33140		A	Heart revascularize (tmr)	22.72	NA	NA	10.19	10.73	2.85	NA	NA	35.76	36.30	090
33141		A	Heart tmr w/other procedure	4.83	NA	NA	1.53	1.57	0.69	NA	NA	7.05	7.09	ZZZ
33200		A	Insertion of heart pacemaker	14.69	NA	NA	7.55	7.03	1.70	NA	NA	23.94	23.42	090
33201		A	Insertion of heart pacemaker	12.08	NA	NA	6.47	6.57	1.36	NA	NA	19.91	20.01	090
33206		A	Insertion of heart pacemaker	7.27	NA	NA	5.24	4.66	0.52	NA	NA	13.03	12.45	090
33207		A	Insertion of heart pacemaker	9.03	NA	NA	5.89	4.98	0.59	NA	NA	15.51	14.60	090
33208		A	Insertion of heart pacemaker	8.12	NA	NA	5.54	4.97	0.56	NA	NA	14.22	13.65	090
33210		A	Insertion of heart electrode	3.30	NA	NA	1.73	1.37	0.18	NA	NA	5.21	4.85	000
33211		A	Insertion of heart electrode	3.39	NA	NA	1.71	1.41	0.21	NA	NA	5.31	5.01	000
33212		A	Insertion of pulse generator	5.51	NA	NA	3.82	3.48	0.43	NA	NA	9.76	9.42	090
33213		A	Insertion of pulse generator	6.36	NA	NA	4.35	3.89	0.45	NA	NA	11.16	10.70	090
33214		A	Upgrade of pacemaker system	7.74	NA	NA	5.48	5.05	0.58	NA	NA	13.80	13.37	090
33215		A	Reposition pacing-defib lead	4.87	NA	NA	3.58	3.29	0.37	NA	NA	8.82	8.53	090
33216		A	Insert lead pace-defib, one	5.77	NA	NA	4.67	4.33	0.36	NA	NA	10.80	10.46	090
33217		A	Insert lead pace-defib, dual	5.74	NA	NA	4.58	4.33	0.39	NA	NA	10.71	10.46	090
33218		A	Repair lead pace-defib, one	5.93	NA	NA	4.92	4.46	0.37	NA	NA	11.22	10.76	090
33220		A	Repair lead pace-defib, dual	6.01	NA	NA	4.99	4.46	0.37	NA	NA	11.37	10.84	090
33222		A	Revise pocket, pacemaker	4.95	NA	NA	4.40	4.33	0.42	NA	NA	9.77	9.70	090
33223		A	Revise pocket, pacing-defib	6.45	NA	NA	5.07	4.72	0.45	NA	NA	11.97	11.62	090
33224		A	Insert pacing lead & connect	9.04	NA	NA	5.15	4.30	0.54	NA	NA	14.73	13.88	000
33225		A	L ventric pacing lead add-on	8.33	NA	NA	4.55	3.58	0.45	NA	NA	13.33	12.36	ZZZ
33226		A	Reposition l ventric lead	8.68	NA	NA	4.97	4.12	0.59	NA	NA	14.24	13.39	000
33233		A	Removal of pacemaker system	3.29	NA	NA	3.35	3.30	0.22	NA	NA	6.86	6.81	090
33234		A	Removal of pacemaker system	7.81	NA	NA	5.63	5.10	0.56	NA	NA	14.00	13.47	090
33235		A	Removal pacemaker electrode	9.85	NA	NA	7.47	6.99	0.73	NA	NA	18.05	17.57	090
33236		A	Remove electrode/thoracotomy	12.58	NA	NA	6.76	7.28	1.68	NA	NA	21.02	21.54	090
33237		A	Remove electrode/thoracotomy	13.69	NA	NA	7.78	7.80	1.59	NA	NA	23.06	23.08	090
33238		A	Remove electrode/thoracotomy	15.20	NA	NA	8.40	8.27	2.02	NA	NA	25.62	25.49	090
33240		A	Insert pulse generator	7.59	NA	NA	5.46	4.81	0.41	NA	NA	13.46	12.81	090
33241		A	Remove pulse generator	3.24	NA	NA	3.10	3.00	0.18	NA	NA	6.52	6.42	090
33243		A	Remove eltrd/thoracotomy	23.36	NA	NA	10.96	11.36	2.09	NA	NA	36.41	36.81	090
33244		A	Remove eltrd, transven	13.74	NA	NA	9.73	9.12	0.99	NA	NA	24.46	23.85	090
33245		A	Insert epic eltrd pace-defib	16.81	NA	NA	8.05	7.95	2.01	NA	NA	26.87	26.77	090
33246		A	Insert epic eltrd/generator	23.11	NA	NA	10.89	10.46	2.63	NA	NA	36.63	36.20	090
33249		A	Eltrd/insert pace-defib	14.96	NA	NA	10.55	8.92	0.77	NA	NA	26.28	24.65	090
33250		A	Ablate heart dysrhythm focus	25.75	NA	NA	10.24	10.85	3.18	NA	NA	39.17	39.78	090
33251		A	Ablate heart dysrhythm focus	28.77	NA	NA	11.25	11.58	3.59	NA	NA	43.61	43.94	090
33253		A	Reconstruct atria	31.33	NA	NA	12.28	13.47	4.52	NA	NA	48.13	49.32	090
33261		A	Ablate heart dysrhythm focus	28.77	NA	NA	11.49	11.72	3.45	NA	NA	43.71	43.94	090
33282		A	Implant pat-active ht record	4.66	NA	NA	4.37	4.12	0.23	NA	NA	9.26	9.01	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
33284		A	Remove pat-active ht record	3.00	NA	NA	3.46	3.52	0.14	NA	NA	6.60	6.66	090
33300		A	Repair of heart wound	29.93	NA	NA	11.69	9.87	2.65	NA	NA	44.27	42.45	090
33305		A	Repair of heart wound	33.67	NA	NA	12.81	11.18	3.12	NA	NA	49.60	47.97	090
33310		A	Exploratory heart surgery	20.19	NA	NA	8.93	9.44	2.58	NA	NA	31.70	32.21	090
33315		A	Exploratory heart surgery	26.01	NA	NA	10.51	10.81	3.27	NA	NA	39.79	40.09	090
33320		A	Repair major blood vessel(s)	18.42	NA	NA	8.81	8.38	2.07	NA	NA	29.30	28.87	090
33321		A	Repair major vessel	20.67	NA	NA	10.44	9.97	2.90	NA	NA	34.01	33.54	090
33322		A	Repair major blood vessel(s)	24.26	NA	NA	9.95	10.28	2.85	NA	NA	37.06	37.39	090
33330		A	Insert major vessel graft	25.13	NA	NA	9.94	10.20	2.81	NA	NA	37.88	38.14	090
33332		A	Insert major vessel graft	24.42	NA	NA	9.72	10.34	3.02	NA	NA	37.16	37.78	090
33335		A	Insert major vessel graft	33.75	NA	NA	13.13	13.31	4.27	NA	NA	51.15	51.33	090
33400		A	Repair of aortic valve	39.23	NA	NA	15.49	15.66	4.10	NA	NA	58.82	58.99	090
33401		A	Valvuloplasty, open	24.33	NA	NA	10.03	12.66	3.56	NA	NA	37.92	40.55	090
33403		A	Valvuloplasty, w/cp bypass	25.31	NA	NA	10.70	13.43	3.54	NA	NA	39.55	42.28	090
33404		A	Prepare heart-aorta conduit	31.21	NA	NA	12.40	14.04	4.32	NA	NA	47.93	49.57	090
33405		A	Replacement of aortic valve	39.97	NA	NA	16.02	17.76	5.31	NA	NA	61.30	63.04	090
33406		A	Replacement of aortic valve	48.87	NA	NA	18.67	19.05	5.43	NA	NA	72.97	73.35	090
33410		A	Replacement of aortic valve	38.69	NA	NA	15.15	16.26	4.68	NA	NA	58.52	59.63	090
33411		A	Replacement of aortic valve	57.11	NA	NA	21.08	19.36	5.46	NA	NA	83.65	81.93	090
33412		A	Replacement of aortic valve	43.71	NA	NA	16.71	19.52	6.37	NA	NA	66.79	69.60	090
33413		A	Replacement of aortic valve	55.27	NA	NA	20.25	20.72	6.51	NA	NA	82.03	82.50	090
33414		A	Repair of aortic valve	39.27	NA	NA	16.30	14.70	4.56	NA	NA	60.13	58.53	090
33415		A	Revision, subvalvular tissue	29.70	NA	NA	11.18	11.83	4.13	NA	NA	45.01	45.66	090
33416		A	Revise ventricle muscle	36.39	NA	NA	13.60	13.56	4.56	NA	NA	54.55	54.51	090
33417		A	Repair of aortic valve	29.13	NA	NA	12.30	13.31	4.09	NA	NA	45.52	46.53	090
33420		A	Revision of mitral valve	25.64	NA	NA	8.74	9.38	1.81	NA	NA	36.19	36.83	090
33422		A	Revision of mitral valve	29.57	NA	NA	12.61	13.42	3.93	NA	NA	46.11	46.92	090
33425		A	Repair of mitral valve	38.37	NA	NA	14.13	13.35	4.06	NA	NA	56.56	55.78	090
33426		A	Repair of mitral valve	41.28	NA	NA	16.14	16.92	5.01	NA	NA	62.43	63.21	090
33427		A	Repair of mitral valve	42.78	NA	NA	16.52	18.70	6.07	NA	NA	65.37	67.55	090
33430		A	Replacement of mitral valve	49.81	NA	NA	18.82	17.71	5.08	NA	NA	73.71	72.60	090
33460		A	Revision of tricuspid valve	27.97	NA	NA	11.09	11.27	3.44	NA	NA	42.50	42.68	090
33463		A	Valvuloplasty, tricuspid	42.57	NA	NA	16.20	13.76	3.86	NA	NA	62.63	60.19	090
33464		A	Valvuloplasty, tricuspid	30.93	NA	NA	12.84	13.38	4.14	NA	NA	47.91	48.45	090
33465		A	Replace tricuspid valve	33.58	NA	NA	12.72	12.93	4.38	NA	NA	50.68	50.89	090
33468		A	Revision of tricuspid valve	32.78	NA	NA	15.74	14.20	4.06	NA	NA	52.58	51.04	090
33470		A	Revision of pulmonary valve	21.24	NA	NA	8.84	10.25	1.03	NA	NA	31.11	32.52	090
33471		A	Valvotomy, pulmonary valve	22.79	NA	NA	8.23	9.39	3.38	NA	NA	34.40	35.56	090
33472		A	Revision of pulmonary valve	22.86	NA	NA	7.07	10.69	3.54	NA	NA	33.47	37.09	090
33474		A	Revision of pulmonary valve	25.85	NA	NA	12.31	11.26	3.21	NA	NA	41.37	40.32	090
33475		A	Replacement, pulmonary valve	44.81	NA	NA	16.89	15.78	4.92	NA	NA	66.62	65.51	090
33476		A	Revision of heart chamber	26.37	NA	NA	11.49	11.87	2.41	NA	NA	40.27	40.65	090
33478		A	Revision of heart chamber	27.34	NA	NA	11.15	12.61	3.88	NA	NA	42.37	43.83	090
33496		A	Repair, prosth valve clot	29.67	NA	NA	11.64	12.50	4.12	NA	NA	45.43	46.29	090
33500		A	Repair heart vessel fistula	27.79	NA	NA	11.18	11.41	3.86	NA	NA	42.83	43.06	090
33501		A	Repair heart vessel fistula	19.39	NA	NA	8.28	8.30	1.90	NA	NA	29.57	29.59	090
33502		A	Coronary artery correction	21.65	NA	NA	9.42	10.68	2.99	NA	NA	34.06	35.32	090
33503		A	Coronary artery graft	22.21	NA	NA	10.80	10.02	1.77	NA	NA	34.78	34.00	090
33504		A	Coronary artery graft	25.26	NA	NA	10.37	11.47	3.35	NA	NA	38.98	40.08	090
33505		A	Repair artery w/tunnel	38.33	NA	NA	13.26	13.02	2.18	NA	NA	53.77	53.53	090
33506		A	Repair artery, translocation	37.78	NA	NA	16.92	15.18	4.65	NA	NA	59.35	57.61	090
33507		A	Repair art, intramural	31.33	NA	NA	11.93	13.24	4.05	NA	NA	47.31	48.62	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
33508		A	Endoscopic vein harvest	0.31	NA	NA	0.10	0.10	0.04	NA	NA	0.45	0.45	ZZZ
33510		A	CABG, vein, single	33.45	NA	NA	14.10	15.81	4.40	NA	NA	51.95	53.66	090
33511		A	CABG, vein, two	34.59	NA	NA	14.66	16.51	4.55	NA	NA	53.80	55.65	090
33512		A	CABG, vein, three	38.73	NA	NA	15.96	17.23	4.66	NA	NA	59.35	60.62	090
33513		A	CABG, vein, four	39.69	NA	NA	16.45	17.49	4.87	NA	NA	61.01	62.05	090
33514		A	CABG, vein, five	40.50	NA	NA	16.68	17.75	4.76	NA	NA	61.94	63.01	090
33516		A	Cabg, vein, six or more	41.96	NA	NA	17.58	18.53	5.11	NA	NA	64.65	65.60	090
33517		A	CABG, artery-vein, single	2.57	NA	NA	0.80	0.83	0.39	NA	NA	3.76	3.79	ZZZ
33518		A	CABG, artery-vein, two	4.84	NA	NA	1.50	1.56	0.73	NA	NA	7.07	7.13	ZZZ
33519		A	CABG, artery-vein, three	7.11	NA	NA	2.20	2.30	1.04	NA	NA	10.35	10.45	ZZZ
33521		A	CABG, artery-vein, four	9.39	NA	NA	2.93	3.04	1.37	NA	NA	13.69	13.80	ZZZ
33522		A	CABG, artery-vein, five	11.65	NA	NA	3.60	3.77	1.77	NA	NA	17.02	17.19	ZZZ
33523		A	Cabg, art-vein, six or more	13.93	NA	NA	4.35	4.49	2.12	NA	NA	20.40	20.54	ZZZ
33530		A	Coronary artery, bypass/reop	5.85	NA	NA	1.81	1.89	0.88	NA	NA	8.54	8.62	ZZZ
33533		A	CABG, arterial, single	37.38	NA	NA	15.18	16.18	4.55	NA	NA	57.11	58.11	090
33534		A	CABG, arterial, two	38.81	NA	NA	15.92	17.30	4.69	NA	NA	59.42	60.80	090
33535		A	CABG, arterial, three	41.48	NA	NA	16.88	17.86	5.01	NA	NA	63.37	64.35	090
33536		A	Cabg, arterial, four or more	40.79	NA	NA	16.50	17.88	5.42	NA	NA	62.71	64.09	090
33542		A	Removal of heart lesion	32.65	NA	NA	12.79	12.97	4.37	NA	NA	49.81	49.99	090
33545		A	Repair of heart damage	41.12	NA	NA	15.63	15.66	5.19	NA	NA	61.94	61.97	090
33548		A	Restore/remodel, ventricle	42.46	NA	NA	16.72	18.69	5.51	NA	NA	64.69	66.66	090
33572		A	Open coronary endarterectomy	4.44	NA	NA	1.36	1.43	0.65	NA	NA	6.45	6.52	ZZZ
33600		A	Closure of valve	30.11	NA	NA	12.61	12.57	4.41	NA	NA	47.13	47.09	090
33602		A	Closure of valve	29.14	NA	NA	13.58	12.76	3.81	NA	NA	46.53	45.71	090
33606		A	Anastomosis/artery-aorta	31.33	NA	NA	12.36	13.37	4.40	NA	NA	48.09	49.10	090
33608		A	Repair anomaly w/conduit	31.68	NA	NA	13.61	14.01	4.73	NA	NA	50.02	50.42	090
33610		A	Repair by enlargement	31.20	NA	NA	11.17	13.02	4.55	NA	NA	46.92	48.77	090
33611		A	Repair double ventricle	35.47	NA	NA	12.05	13.64	4.36	NA	NA	51.88	53.47	090
33612		A	Repair double ventricle	36.47	NA	NA	13.15	14.68	5.28	NA	NA	54.90	56.43	090
33615		A	Repair, modified fontan	35.72	NA	NA	12.53	13.02	4.31	NA	NA	52.56	53.05	090
33617		A	Repair single ventricle	38.92	NA	NA	16.71	16.21	5.64	NA	NA	61.27	60.77	090
33619		A	Repair single ventricle	48.56	NA	NA	18.62	20.30	6.44	NA	NA	73.62	75.30	090
33641		A	Repair heart septum defect	28.47	NA	NA	10.55	9.84	3.22	NA	NA	42.24	41.53	090
33645		A	Revision of heart veins	27.94	NA	NA	11.08	11.62	3.78	NA	NA	42.80	43.34	090
33647		A	Repair heart septum defects	29.33	NA	NA	12.54	13.49	3.31	NA	NA	45.18	46.13	090
33660		A	Repair of heart defects	31.73	NA	NA	12.27	13.21	4.48	NA	NA	48.48	49.42	090
33665		A	Repair of heart defects	34.75	NA	NA	13.51	13.78	3.99	NA	NA	52.25	52.52	090
33670		A	Repair of heart chambers	36.56	NA	NA	13.08	13.18	4.64	NA	NA	54.28	54.38	090
33681		A	Repair heart septum defect	32.10	NA	NA	13.46	14.41	4.44	NA	NA	50.00	50.95	090
33684		A	Repair heart septum defect	34.27	NA	NA	20.80	15.45	3.38	NA	NA	58.45	53.10	090
33688		A	Repair heart septum defect	34.65	NA	NA	9.78	10.32	4.72	NA	NA	49.15	49.69	090
33690		A	Reinforce pulmonary artery	20.16	NA	NA	8.74	9.83	1.96	NA	NA	30.86	31.95	090
33692		A	Repair of heart defects	31.34	NA	NA	9.04	12.73	4.57	NA	NA	44.95	48.64	090
33694		A	Repair of heart defects	35.47	NA	NA	9.87	13.16	5.26	NA	NA	50.60	53.89	090
33697		A	Repair of heart defects	37.47	NA	NA	22.18	16.73	4.08	NA	NA	63.73	58.28	090
33702		A	Repair of heart defects	27.07	NA	NA	11.76	12.39	3.67	NA	NA	42.50	43.13	090
33710		A	Repair of heart defects	30.24	NA	NA	11.89	13.47	4.42	NA	NA	46.55	48.13	090
33720		A	Repair of heart defect	27.09	NA	NA	11.35	12.08	3.83	NA	NA	42.27	43.00	090
33722		A	Repair of heart defect	29.01	NA	NA	8.51	12.55	1.30	NA	NA	38.82	42.86	090
33730		A	Repair heart-vein defect(s)	35.97	NA	NA	13.47	13.99	5.01	NA	NA	54.45	54.97	090
33732		A	Repair heart-vein defect	28.76	NA	NA	14.99	13.81	3.67	NA	NA	47.42	46.24	090
33735		A	Revision of heart chamber	22.00	NA	NA	9.66	9.15	1.91	NA	NA	33.57	33.06	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
33736		A	Revision of heart chamber	24.12	NA	NA	10.93	11.64	3.08	NA	NA	38.13	38.84	090
33737		A	Revision of heart chamber	22.30	NA	NA	7.44	10.08	3.24	NA	NA	32.98	35.62	090
33750		A	Major vessel shunt	22.02	NA	NA	11.54	10.57	1.16	NA	NA	34.72	33.75	090
33755		A	Major vessel shunt	22.40	NA	NA	7.69	8.55	3.25	NA	NA	33.34	34.20	090
33762		A	Major vessel shunt	22.40	NA	NA	7.03	9.39	3.13	NA	NA	32.56	34.92	090
33764		A	Major vessel shunt & graft	22.40	NA	NA	9.26	10.00	3.00	NA	NA	34.66	35.40	090
33766		A	Major vessel shunt	23.37	NA	NA	8.48	10.90	3.69	NA	NA	35.54	37.96	090
33767		A	Major vessel shunt	25.10	NA	NA	9.53	11.20	3.81	NA	NA	38.44	40.11	090
33768		A	Cavopulmonary shunting	8.00	NA	NA	2.21	2.56	1.19	NA	NA	11.40	11.75	ZZZ
33770		A	Repair great vessels defect	39.00	NA	NA	11.10	13.82	5.72	NA	NA	55.82	58.54	090
33771		A	Repair great vessels defect	40.56	NA	NA	11.05	12.08	5.66	NA	NA	57.27	58.30	090
33774		A	Repair great vessels defect	31.48	NA	NA	12.58	14.17	4.80	NA	NA	48.86	50.45	090
33775		A	Repair great vessels defect	32.79	NA	NA	9.94	13.76	4.98	NA	NA	47.71	51.53	090
33776		A	Repair great vessels defect	34.45	NA	NA	13.53	15.27	5.07	NA	NA	53.05	54.79	090
33777		A	Repair great vessels defect	33.87	NA	NA	9.74	14.18	5.47	NA	NA	49.08	53.52	090
33778		A	Repair great vessels defect	42.58	NA	NA	15.44	16.57	6.18	NA	NA	64.20	65.33	090
33779		A	Repair great vessels defect	43.13	NA	NA	11.88	14.53	2.91	NA	NA	57.92	60.57	090
33780		A	Repair great vessels defect	43.83	NA	NA	12.19	17.40	3.67	NA	NA	59.69	64.90	090
33781		A	Repair great vessels defect	43.14	NA	NA	15.46	13.89	5.95	NA	NA	64.55	62.98	090
33786		A	Repair arterial trunk	41.70	NA	NA	11.19	15.37	5.69	NA	NA	58.58	62.76	090
33788		A	Revision of pulmonary artery	27.22	NA	NA	9.71	11.41	4.02	NA	NA	40.95	42.65	090
33800		A	Aortic suspension	17.20	NA	NA	7.45	7.96	2.45	NA	NA	27.10	27.61	090
33802		A	Repair vessel defect	18.20	NA	NA	7.47	8.81	2.26	NA	NA	27.93	29.27	090
33803		A	Repair vessel defect	20.14	NA	NA	6.30	8.92	3.19	NA	NA	29.63	32.25	090
33813		A	Repair septal defect	21.19	NA	NA	9.15	10.49	3.12	NA	NA	33.46	34.80	090
33814		A	Repair septal defect	26.37	NA	NA	10.67	12.18	3.84	NA	NA	40.88	42.39	090
33820		A	Revise major vessel	16.59	NA	NA	8.53	8.42	2.34	NA	NA	27.46	27.35	090
33822		A	Revise major vessel	17.61	NA	NA	5.87	8.20	2.67	NA	NA	26.15	28.48	090
33824		A	Revise major vessel	20.06	NA	NA	8.70	9.68	2.88	NA	NA	31.64	32.62	090
33840		A	Remove aorta constriction	21.17	NA	NA	9.06	10.01	2.15	NA	NA	32.38	33.33	090
33845		A	Remove aorta constriction	22.73	NA	NA	9.76	10.98	3.21	NA	NA	35.70	36.92	090
33851		A	Remove aorta constriction	21.81	NA	NA	9.30	10.36	3.17	NA	NA	34.28	35.34	090
33852		A	Repair septal defect	24.24	NA	NA	10.04	11.05	2.15	NA	NA	36.43	37.44	090
33853		A	Repair septal defect	32.31	NA	NA	13.28	14.47	4.47	NA	NA	50.06	51.25	090
33860		A	Ascending aortic graft	43.13	NA	NA	16.08	16.40	5.74	NA	NA	64.95	65.27	090
33861		A	Ascending aortic graft	43.88	NA	NA	16.31	17.40	6.35	NA	NA	66.54	67.63	090
33863		A	Ascending aortic graft	48.52	NA	NA	17.87	18.52	6.57	NA	NA	72.96	73.61	090
33870		A	Transverse aortic arch graft	45.87	NA	NA	16.88	18.04	6.60	NA	NA	69.35	70.51	090
33875		A	Thoracic aortic graft	35.64	NA	NA	13.37	13.94	4.88	NA	NA	53.89	54.46	090
33877		A	Thoracoabdominal graft	57.75	NA	NA	18.74	16.96	5.92	NA	NA	82.41	80.63	090
33880		A	Endovasc taa repr incl subcl	34.44	NA	NA	11.00	12.88	2.74	NA	NA	48.18	50.06	090
33881		A	Endovasc taa repr w/o subcl	29.44	NA	NA	9.71	11.42	2.32	NA	NA	41.47	43.18	090
33883		A	Insert endovasc prosth, taa	20.95	NA	NA	7.31	8.74	2.10	NA	NA	30.36	31.79	090
33884		A	Endovasc prosth, taa, add-on	8.20	NA	NA	2.09	2.46	0.86	NA	NA	11.15	11.52	ZZZ
33886		A	Endovasc prosth, delayed	17.95	NA	NA	6.51	7.82	1.79	NA	NA	26.25	27.56	090
33889		A	Artery transpose/endovas taa	15.92	NA	NA	4.32	4.97	2.17	NA	NA	22.41	23.06	000
33891		A	Car-car bp grft/endovas taa	20.00	NA	NA	6.73	6.92	2.72	NA	NA	29.45	29.64	000
33910		A	Remove lung artery emboli	29.56	NA	NA	11.45	11.46	3.69	NA	NA	44.70	44.71	090
33915		A	Remove lung artery emboli	24.80	NA	NA	10.57	9.89	1.44	NA	NA	36.81	36.13	090
33916		A	Surgery of great vessel	28.26	NA	NA	10.99	11.28	3.66	NA	NA	42.91	43.20	090
33917		A	Repair pulmonary artery	25.10	NA	NA	10.43	11.77	3.69	NA	NA	39.22	40.56	090
33920		A	Repair pulmonary atresia	32.54	NA	NA	11.37	13.24	4.37	NA	NA	48.28	50.15	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
33922		A	Transect pulmonary artery	24.05	NA	NA	11.61	11.10	3.09	NA	NA	38.75	38.24	090
33924		A	Remove pulmonary shunt	5.49	NA	NA	2.16	1.93	0.82	NA	NA	8.47	8.24	ZZZ
33925		A	Rpr pul art unifocal w/o cpb	31.23	NA	NA	10.03	13.53	4.60	NA	NA	45.86	49.36	090
33926		A	Repr pul art, unifocal w/cpb	44.66	NA	NA	14.31	16.88	6.20	NA	NA	65.17	67.74	090
33935		R	Transplantation, heart/lung	61.56	NA	NA	28.07	28.66	9.03	NA	NA	98.66	99.25	090
33945		R	Transplantation of heart	50.14	NA	NA	19.19	20.89	6.24	NA	NA	75.57	77.27	090
33960		A	External circulation assist	19.33	NA	NA	5.63	5.10	2.66	NA	NA	27.62	27.09	000
33961		A	External circulation assist	10.91	NA	NA	2.85	3.43	0.88	NA	NA	14.64	15.22	ZZZ
33967		A	Insert ia percut device	4.84	NA	NA	2.50	2.01	0.35	NA	NA	7.69	7.20	000
33968		A	Remove aortic assist device	0.64	NA	NA	0.27	0.24	0.07	NA	NA	0.98	0.95	000
33970		A	Aortic circulation assist	6.74	NA	NA	2.59	2.37	0.82	NA	NA	10.15	9.93	000
33971		A	Aortic circulation assist	11.89	NA	NA	6.17	6.06	1.25	NA	NA	19.31	19.20	090
33973		A	Insert balloon device	9.75	NA	NA	3.94	3.48	1.26	NA	NA	14.95	14.49	000
33974		A	Remove intra-aortic balloon	14.89	NA	NA	7.90	7.90	1.73	NA	NA	24.52	24.52	090
33975		A	Implant ventricular device	20.97	NA	NA	6.72	6.41	3.06	NA	NA	30.75	30.44	XXX
33976		A	Implant ventricular device	22.97	NA	NA	7.98	7.67	3.25	NA	NA	34.20	33.89	XXX
33977		A	Remove ventricular device	19.99	NA	NA	9.49	10.70	2.80	NA	NA	32.28	33.49	090
33978		A	Remove ventricular device	22.43	NA	NA	10.66	11.50	3.30	NA	NA	36.39	37.23	090
33979		A	Insert intracorporeal device	45.93	NA	NA	14.55	14.86	6.95	NA	NA	67.43	67.74	XXX
33980		A	Remove intracorporeal device	64.76	NA	NA	25.28	25.30	8.56	NA	NA	98.60	98.62	090
34001		A	Removal of artery clot	17.74	NA	NA	7.02	6.80	1.84	NA	NA	26.60	26.38	090
34051		A	Removal of artery clot	16.85	NA	NA	7.07	7.62	2.20	NA	NA	26.12	26.67	090
34101		A	Removal of artery clot	10.81	NA	NA	4.59	5.18	1.41	NA	NA	16.81	17.40	090
34111		A	Removal of arm artery clot	10.81	NA	NA	4.66	5.19	1.40	NA	NA	16.87	17.40	090
34151		A	Removal of artery clot	26.35	NA	NA	9.02	10.08	3.55	NA	NA	38.92	39.98	090
34201		A	Removal of artery clot	18.40	NA	NA	6.72	5.75	1.45	NA	NA	26.57	25.60	090
34203		A	Removal of leg artery clot	17.67	NA	NA	6.85	7.77	2.35	NA	NA	26.87	27.79	090
34401		A	Removal of vein clot	26.35	NA	NA	9.79	10.47	3.09	NA	NA	39.23	39.91	090
34421		A	Removal of vein clot	13.25	NA	NA	5.62	6.14	1.55	NA	NA	20.42	20.94	090
34451		A	Removal of vein clot	28.35	NA	NA	10.09	11.13	3.83	NA	NA	42.27	43.31	090
34471		A	Removal of vein clot	20.94	NA	NA	7.58	5.89	1.18	NA	NA	29.70	28.01	090
34490		A	Removal of vein clot	10.79	NA	NA	4.63	5.24	1.41	NA	NA	16.83	17.44	090
34501		A	Repair valve, femoral vein	16.68	NA	NA	7.16	8.17	2.34	NA	NA	26.18	27.19	090
34502		A	Reconstruct vena cava	27.80	NA	NA	11.03	12.01	3.62	NA	NA	42.45	43.43	090
34510		A	Transposition of vein valve	19.74	NA	NA	7.19	8.88	2.32	NA	NA	29.25	30.94	090
34520		A	Cross-over vein graft	18.99	NA	NA	9.51	8.73	2.28	NA	NA	30.78	30.00	090
34530		A	Leg vein fusion	17.69	NA	NA	8.10	8.50	1.73	NA	NA	27.52	27.92	090
34800		A	Endovas aaa repr w/sm tube	21.42	NA	NA	7.73	8.83	2.45	NA	NA	31.60	32.70	090
34802		A	Endovas aaa repr w/2-p part	23.67	NA	NA	8.64	9.52	2.32	NA	NA	34.63	35.51	090
34803		A	Endovas aaa repr w/3-p part	24.70	NA	NA	8.62	9.84	2.00	NA	NA	35.32	36.54	090
34804		A	Endovas aaa repr w/1-p part	23.67	NA	NA	8.47	9.49	2.29	NA	NA	34.43	35.45	090
34805		A	Endovas aaa repr w/long tube	22.55	NA	NA	7.66	9.17	2.00	NA	NA	32.21	33.72	090
34808		A	Endovas iliac a device addon	4.12	NA	NA	1.16	1.32	0.59	NA	NA	5.87	6.03	ZZZ
34812		A	Xpose for endoprosth, femorl	6.74	NA	NA	1.79	2.13	1.18	NA	NA	9.71	10.05	000
34813		A	Femoral endovas graft add-on	4.79	NA	NA	1.25	1.49	0.67	NA	NA	6.71	6.95	ZZZ
34820		A	Xpose for endoprosth, iliac	9.74	NA	NA	2.56	3.07	1.50	NA	NA	13.80	14.31	000
34825		A	Endovasc extend prosth, init	12.68	NA	NA	5.43	5.98	1.28	NA	NA	19.39	19.94	090
34826		A	Endovasc exten prosth, addll	4.12	NA	NA	1.21	1.33	0.44	NA	NA	5.77	5.89	ZZZ
34830		A	Open aortic tube prosth repr	35.04	NA	NA	11.14	13.08	4.54	NA	NA	50.72	52.66	090
34831		A	Open aortoiliac prosth repr	37.79	NA	NA	12.55	11.96	4.88	NA	NA	55.22	54.63	090
34832		A	Open aortofemor prosth repr	37.79	NA	NA	12.04	14.01	4.84	NA	NA	54.67	56.64	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
34833		A	Xpose for endoprosth, iliac	11.98	NA	NA	3.47	4.20	1.69	NA	NA	17.14	17.87	000
34834		A	Xpose, endoprosth, brachial	5.34	NA	NA	1.70	2.08	0.76	NA	NA	7.80	8.18	000
34900		A	Endovasc iliac repr w/graft	16.73	NA	NA	6.61	7.35	1.99	NA	NA	25.33	26.07	090
35001		A	Repair defect of artery	20.63	NA	NA	7.84	9.15	2.80	NA	NA	31.27	32.58	090
35002		A	Repair artery rupture, neck	22.05	NA	NA	8.09	9.31	2.99	NA	NA	33.13	34.35	090
35005		A	Repair defect of artery	19.11	NA	NA	8.75	8.84	1.76	NA	NA	29.62	29.71	090
35011		A	Repair defect of artery	18.46	NA	NA	6.61	7.65	2.54	NA	NA	27.61	28.65	090
35013		A	Repair artery rupture, arm	23.04	NA	NA	8.23	9.33	3.09	NA	NA	34.36	35.46	090
35021		A	Repair defect of artery	22.03	NA	NA	8.89	9.30	2.86	NA	NA	33.78	34.19	090
35022		A	Repair artery rupture, chest	25.56	NA	NA	9.66	9.83	3.16	NA	NA	38.38	38.55	090
35045		A	Repair defect of arm artery	17.91	NA	NA	6.59	7.29	2.44	NA	NA	26.94	27.64	090
35081		A	Repair defect of artery	33.31	NA	NA	10.82	11.32	4.00	NA	NA	48.13	48.63	090
35082		A	Repair artery rupture, aorta	41.87	NA	NA	13.45	14.86	5.42	NA	NA	60.74	62.15	090
35091		A	Repair defect of artery	35.35	NA	NA	10.80	12.90	5.12	NA	NA	51.27	53.37	090
35092		A	Repair artery rupture, aorta	50.75	NA	NA	15.57	17.15	6.38	NA	NA	72.70	74.28	090
35102		A	Repair defect of artery	36.31	NA	NA	11.47	12.16	4.47	NA	NA	52.25	52.94	090
35103		A	Repair artery rupture, groin	43.43	NA	NA	13.58	15.31	5.74	NA	NA	62.75	64.48	090
35111		A	Repair defect of artery	26.11	NA	NA	8.80	10.07	3.46	NA	NA	38.37	39.64	090
35112		A	Repair artery rupture,spleen	32.38	NA	NA	10.60	11.64	4.07	NA	NA	47.05	48.09	090
35121		A	Repair defect of artery	31.35	NA	NA	10.75	11.99	4.29	NA	NA	46.39	47.63	090
35122		A	Repair artery rupture, belly	37.70	NA	NA	12.21	13.43	4.74	NA	NA	54.65	55.87	090
35131		A	Repair defect of artery	26.23	NA	NA	9.13	10.36	3.79	NA	NA	39.15	40.38	090
35132		A	Repair artery rupture, groin	32.38	NA	NA	10.56	11.95	4.29	NA	NA	47.23	48.62	090
35141		A	Repair defect of artery	20.79	NA	NA	7.41	8.56	2.89	NA	NA	31.09	32.24	090
35142		A	Repair artery rupture, thigh	24.97	NA	NA	8.77	9.99	3.35	NA	NA	37.09	38.31	090
35151		A	Repair defect of artery	23.55	NA	NA	8.27	9.58	3.23	NA	NA	35.05	36.36	090
35152		A	Repair artery rupture, knee	27.47	NA	NA	9.47	10.92	3.60	NA	NA	40.54	41.99	090
35180		A	Repair blood vessel lesion	14.95	NA	NA	6.66	6.89	1.00	NA	NA	22.61	22.84	090
35182		A	Repair blood vessel lesion	31.52	NA	NA	11.86	12.59	4.35	NA	NA	47.73	48.46	090
35184		A	Repair blood vessel lesion	18.67	NA	NA	7.18	8.03	2.52	NA	NA	28.37	29.22	090
35188		A	Repair blood vessel lesion	14.98	NA	NA	6.43	7.35	2.15	NA	NA	23.56	24.48	090
35189		A	Repair blood vessel lesion	29.79	NA	NA	10.22	11.54	4.00	NA	NA	44.01	45.33	090
35190		A	Repair blood vessel lesion	13.27	NA	NA	5.54	6.25	1.79	NA	NA	20.60	21.31	090
35201		A	Repair blood vessel lesion	16.78	NA	NA	6.59	7.66	2.33	NA	NA	25.70	26.77	090
35206		A	Repair blood vessel lesion	13.72	NA	NA	5.49	6.30	1.86	NA	NA	21.07	21.88	090
35207		A	Repair blood vessel lesion	10.79	NA	NA	6.44	7.14	1.48	NA	NA	18.71	19.41	090
35211		A	Repair blood vessel lesion	24.44	NA	NA	10.23	10.54	3.19	NA	NA	37.86	38.17	090
35216		A	Repair blood vessel lesion	36.43	NA	NA	13.50	10.13	2.64	NA	NA	52.57	49.20	090
35221		A	Repair blood vessel lesion	26.50	NA	NA	8.67	9.64	3.36	NA	NA	38.53	39.50	090
35226		A	Repair blood vessel lesion	15.18	NA	NA	6.07	7.11	2.01	NA	NA	23.26	24.30	090
35231		A	Repair blood vessel lesion	21.04	NA	NA	7.87	9.31	2.88	NA	NA	31.79	33.23	090
35236		A	Repair blood vessel lesion	17.90	NA	NA	6.64	7.59	2.42	NA	NA	26.96	27.91	090
35241		A	Repair blood vessel lesion	25.44	NA	NA	10.08	10.88	3.52	NA	NA	39.04	39.84	090
35246		A	Repair blood vessel lesion	28.11	NA	NA	12.33	11.67	3.85	NA	NA	44.29	43.63	090
35251		A	Repair blood vessel lesion	31.79	NA	NA	9.95	11.35	4.12	NA	NA	45.86	47.26	090
35256		A	Repair blood vessel lesion	18.94	NA	NA	6.83	7.99	2.62	NA	NA	28.39	29.55	090
35261		A	Repair blood vessel lesion	18.84	NA	NA	7.43	7.88	2.60	NA	NA	28.87	29.32	090
35266		A	Repair blood vessel lesion	15.71	NA	NA	5.87	6.73	2.09	NA	NA	23.67	24.53	090
35271		A	Repair blood vessel lesion	24.44	NA	NA	9.78	10.35	3.15	NA	NA	37.37	37.94	090
35276		A	Repair blood vessel lesion	25.66	NA	NA	9.72	10.85	3.48	NA	NA	38.86	39.99	090
35281		A	Repair blood vessel lesion	29.87	NA	NA	10.04	11.31	3.96	NA	NA	43.87	45.14	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
35286		A	Repair blood vessel lesion	17.00	NA	NA	6.66	7.72	2.34	NA	NA	26.00	27.06	090
35301		A	Rechanneling of artery	19.49	NA	NA	7.03	8.10	2.67	NA	NA	29.19	30.26	090
35311		A	Rechanneling of artery	28.48	NA	NA	9.84	11.29	3.41	NA	NA	41.73	43.18	090
35321		A	Rechanneling of artery	16.47	NA	NA	6.14	7.09	2.24	NA	NA	24.85	25.80	090
35331		A	Rechanneling of artery	27.55	NA	NA	9.29	10.77	3.82	NA	NA	40.66	42.14	090
35341		A	Rechanneling of artery	26.03	NA	NA	8.88	10.39	3.77	NA	NA	38.68	40.19	090
35351		A	Rechanneling of artery	24.49	NA	NA	8.14	9.25	3.34	NA	NA	35.97	37.08	090
35355		A	Rechanneling of artery	19.74	NA	NA	6.78	7.77	2.66	NA	NA	29.18	30.17	090
35361		A	Rechanneling of artery	30.05	NA	NA	10.02	11.30	4.14	NA	NA	44.21	45.49	090
35363		A	Rechanneling of artery	32.16	NA	NA	10.84	12.18	4.32	NA	NA	47.32	48.66	090
35371		A	Rechanneling of artery	15.19	NA	NA	5.75	6.67	2.13	NA	NA	23.07	23.99	090
35372		A	Rechanneling of artery	18.46	NA	NA	6.61	7.70	2.62	NA	NA	27.69	28.78	090
35381		A	Rechanneling of artery	16.63	NA	NA	6.57	7.52	2.25	NA	NA	25.45	26.40	090
35390		A	Reoperation, carotid add-on	3.19	NA	NA	0.88	1.02	0.46	NA	NA	4.53	4.67	ZZZ
35400		A	Angioscopy	3.00	NA	NA	0.78	1.03	0.43	NA	NA	4.21	4.46	ZZZ
35450		A	Repair arterial blockage	10.05	NA	NA	3.33	3.51	1.25	NA	NA	14.63	14.81	000
35452		A	Repair arterial blockage	6.90	NA	NA	2.18	2.50	0.94	NA	NA	10.02	10.34	000
35454		A	Repair arterial blockage	6.03	NA	NA	1.88	2.21	0.87	NA	NA	8.78	9.11	000
35456		A	Repair arterial blockage	7.34	NA	NA	2.36	2.67	1.04	NA	NA	10.74	11.05	000
35458		A	Repair arterial blockage	9.48	NA	NA	2.97	3.35	1.26	NA	NA	13.71	14.09	000
35459		A	Repair arterial blockage	8.62	NA	NA	2.59	3.03	1.21	NA	NA	12.42	12.86	000
35460		A	Repair venous blockage	6.03	NA	NA	1.81	2.16	0.83	NA	NA	8.67	9.02	000
35470		A	Repair arterial blockage	8.62	63.65	82.75	3.64	3.43	0.69	72.96	92.06	12.95	12.74	000
35471		A	Repair arterial blockage	10.05	68.40	92.51	4.87	4.19	0.67	79.12	103.2	15.59	14.91	000
35472		A	Repair arterial blockage	6.90	49.41	60.76	2.91	2.79	0.58	56.89	68.24	10.39	10.27	000
35473		A	Repair arterial blockage	6.03	48.33	57.09	2.62	2.48	0.51	54.87	63.63	9.16	9.02	000
35474		A	Repair arterial blockage	7.35	62.75	81.67	3.14	2.96	0.57	70.67	89.59	11.06	10.88	000
35475		R	Repair arterial blockage	9.48	50.48	54.82	3.56	3.57	0.62	60.58	64.92	13.66	13.67	000
35476		A	Repair venous blockage	6.03	38.73	43.33	2.28	2.34	0.34	45.10	49.70	8.65	8.71	000
35480		A	Atherectomy, open	11.06	NA	NA	4.03	4.05	1.28	NA	NA	16.37	16.39	000
35481		A	Atherectomy, open	7.60	NA	NA	2.54	2.80	1.13	NA	NA	11.27	11.53	000
35482		A	Atherectomy, open	6.64	NA	NA	2.17	2.47	0.89	NA	NA	9.70	10.00	000
35483		A	Atherectomy, open	8.09	NA	NA	2.84	2.98	1.15	NA	NA	12.08	12.22	000
35484		A	Atherectomy, open	10.42	NA	NA	3.10	3.61	1.27	NA	NA	14.79	15.30	000
35485		A	Atherectomy, open	9.48	NA	NA	3.08	3.43	1.35	NA	NA	13.91	14.26	000
35490		A	Atherectomy, percutaneous	11.06	NA	NA	6.42	5.14	0.71	NA	NA	18.19	16.91	000
35491		A	Atherectomy, percutaneous	7.60	NA	NA	3.98	3.47	0.74	NA	NA	12.32	11.81	000
35492		A	Atherectomy, percutaneous	6.64	NA	NA	3.73	3.33	0.43	NA	NA	10.80	10.40	000
35493		A	Atherectomy, percutaneous	8.09	NA	NA	4.29	3.93	0.56	NA	NA	12.94	12.58	000
35494		A	Atherectomy, percutaneous	10.42	NA	NA	5.43	4.71	0.59	NA	NA	16.44	15.72	000
35495		A	Atherectomy, percutaneous	9.48	NA	NA	4.79	4.50	0.69	NA	NA	14.96	14.67	000
35500		A	Harvest vein for bypass	6.44	NA	NA	1.74	1.96	0.93	NA	NA	9.11	9.33	ZZZ
35501		A	Artery bypass graft	19.70	NA	NA	7.54	8.25	2.80	NA	NA	30.04	30.75	090
35506		A	Artery bypass graft	25.19	NA	NA	9.06	9.38	2.86	NA	NA	37.11	37.43	090
35507		A	Artery bypass graft	20.60	NA	NA	7.83	9.05	2.84	NA	NA	31.27	32.49	090
35508		A	Artery bypass graft	25.95	NA	NA	9.84	9.56	2.77	NA	NA	38.56	38.28	090
35509		A	Artery bypass graft	18.94	NA	NA	7.06	8.36	2.61	NA	NA	28.61	29.91	090
35510		A	Artery bypass graft	24.25	NA	NA	7.98	9.65	2.11	NA	NA	34.34	36.01	090
35511		A	Artery bypass graft	22.08	NA	NA	7.57	8.93	2.90	NA	NA	32.55	33.91	090
35512		A	Artery bypass graft	23.75	NA	NA	7.83	9.48	2.11	NA	NA	33.69	35.34	090
35515		A	Artery bypass graft	25.95	NA	NA	9.26	9.30	2.77	NA	NA	37.98	38.02	090
35516		A	Artery bypass graft	24.07	NA	NA	8.46	7.23	2.33	NA	NA	34.86	33.63	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
35518		A	Artery bypass graft	22.53	NA	NA	7.70	8.68	3.02	NA	NA	33.25	34.23	090
35521		A	Artery bypass graft	23.94	NA	NA	8.36	9.49	3.12	NA	NA	35.42	36.55	090
35522		A	Artery bypass graft	23.01	NA	NA	7.69	9.26	2.11	NA	NA	32.81	34.38	090
35525		A	Artery bypass graft	21.55	NA	NA	7.36	8.89	2.11	NA	NA	31.02	32.55	090
35526		A	Artery bypass graft	31.43	NA	NA	18.64	14.07	3.62	NA	NA	53.69	49.12	090
35531		A	Artery bypass graft	38.92	NA	NA	12.26	13.95	5.16	NA	NA	56.34	58.03	090
35533		A	Artery bypass graft	29.73	NA	NA	10.16	11.35	3.84	NA	NA	43.73	44.92	090
35536		A	Artery bypass graft	33.54	NA	NA	11.17	12.53	4.61	NA	NA	49.32	50.68	090
35541		A	Artery bypass graft	26.90	NA	NA	9.38	10.77	3.70	NA	NA	39.98	41.37	090
35546		A	Artery bypass graft	26.40	NA	NA	9.20	10.47	3.69	NA	NA	39.29	40.56	090
35548		A	Artery bypass graft	22.50	NA	NA	8.14	9.12	2.97	NA	NA	33.61	34.59	090
35549		A	Artery bypass graft	24.27	NA	NA	9.28	10.12	3.29	NA	NA	36.84	37.68	090
35551		A	Artery bypass graft	27.65	NA	NA	10.01	11.14	3.74	NA	NA	41.40	42.53	090
35556		A	Artery bypass graft	26.56	NA	NA	9.13	9.60	3.09	NA	NA	38.78	39.25	090
35558		A	Artery bypass graft	22.94	NA	NA	8.33	9.26	2.99	NA	NA	34.26	35.19	090
35560		A	Artery bypass graft	33.84	NA	NA	11.10	12.79	4.74	NA	NA	49.68	51.37	090
35563		A	Artery bypass graft	25.93	NA	NA	8.83	10.12	3.51	NA	NA	38.27	39.56	090
35565		A	Artery bypass graft	24.94	NA	NA	8.72	9.80	3.29	NA	NA	36.95	38.03	090
35566		A	Artery bypass graft	32.16	NA	NA	10.55	11.20	3.82	NA	NA	46.53	47.18	090
35571		A	Artery bypass graft	25.33	NA	NA	9.02	10.41	3.42	NA	NA	37.77	39.16	090
35572		A	Harvest femoropopliteal vein	6.81	NA	NA	1.90	2.16	0.99	NA	NA	9.70	9.96	ZZZ
35583		A	Vein bypass graft	27.56	NA	NA	9.54	10.02	3.16	NA	NA	40.26	40.74	090
35585		A	Vein bypass graft	32.16	NA	NA	10.81	11.89	4.01	NA	NA	46.98	48.06	090
35587		A	Vein bypass graft	26.02	NA	NA	9.44	10.97	3.51	NA	NA	38.97	40.50	090
35600		A	Harvest artery for cabg	4.94	NA	NA	1.56	1.61	0.73	NA	NA	7.23	7.28	ZZZ
35601		A	Artery bypass graft	18.31	NA	NA	6.91	8.21	2.49	NA	NA	27.71	29.01	090
35606		A	Artery bypass graft	22.32	NA	NA	8.25	8.84	2.69	NA	NA	33.26	33.85	090
35612		A	Artery bypass graft	16.64	NA	NA	6.63	7.58	2.08	NA	NA	25.35	26.30	090
35616		A	Artery bypass graft	21.70	NA	NA	7.75	8.03	2.19	NA	NA	31.64	31.92	090
35621		A	Artery bypass graft	20.91	NA	NA	7.22	8.33	2.91	NA	NA	31.04	32.15	090
35623		A	Bypass graft, not vein	25.73	NA	NA	8.87	10.11	3.45	NA	NA	38.05	39.29	090
35626		A	Artery bypass graft	29.02	NA	NA	10.55	11.64	4.07	NA	NA	43.64	44.73	090
35631		A	Artery bypass graft	35.84	NA	NA	11.44	13.26	4.95	NA	NA	52.23	54.05	090
35636		A	Artery bypass graft	31.56	NA	NA	10.19	11.80	4.09	NA	NA	45.84	47.45	090
35641		A	Artery bypass graft	26.24	NA	NA	9.44	10.68	3.53	NA	NA	39.21	40.45	090
35642		A	Artery bypass graft	18.79	NA	NA	7.91	8.51	2.27	NA	NA	28.97	29.57	090
35645		A	Artery bypass graft	18.28	NA	NA	7.66	8.13	2.49	NA	NA	28.43	28.90	090
35646		A	Artery bypass graft	32.78	NA	NA	11.10	12.63	4.43	NA	NA	48.31	49.84	090
35647		A	Artery bypass graft	29.56	NA	NA	10.01	11.35	3.98	NA	NA	43.55	44.89	090
35650		A	Artery bypass graft	20.04	NA	NA	7.05	8.05	2.71	NA	NA	29.80	30.80	090
35651		A	Artery bypass graft	25.90	NA	NA	8.90	10.29	3.35	NA	NA	38.15	39.54	090
35654		A	Artery bypass graft	26.11	NA	NA	8.83	10.22	3.52	NA	NA	38.46	39.85	090
35656		A	Artery bypass graft	20.35	NA	NA	7.28	8.29	2.79	NA	NA	30.42	31.43	090
35661		A	Artery bypass graft	20.16	NA	NA	7.56	8.60	2.71	NA	NA	30.43	31.47	090
35663		A	Artery bypass graft	23.74	NA	NA	8.36	9.59	3.10	NA	NA	35.20	36.43	090
35665		A	Artery bypass graft	22.16	NA	NA	7.87	9.07	3.00	NA	NA	33.03	34.23	090
35666		A	Artery bypass graft	23.47	NA	NA	8.92	10.23	3.15	NA	NA	35.54	36.85	090
35671		A	Artery bypass graft	20.58	NA	NA	8.05	9.06	2.77	NA	NA	31.40	32.41	090
35681		A	Composite bypass graft	1.60	NA	NA	0.43	0.51	0.23	NA	NA	2.26	2.34	ZZZ
35682		A	Composite bypass graft	7.19	NA	NA	1.86	2.26	1.03	NA	NA	10.08	10.48	ZZZ
35683		A	Composite bypass graft	8.49	NA	NA	2.21	2.68	1.20	NA	NA	11.90	12.37	ZZZ
35685		A	Bypass graft patency/patch	4.04	NA	NA	1.05	1.28	0.58	NA	NA	5.67	5.90	ZZZ

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
35686		A	Bypass graft/av fist patency	3.34	NA	NA	0.87	1.07	0.47	NA	NA	4.68	4.88	ZZZ
35691		A	Arterial transposition	18.26	NA	NA	6.61	7.97	2.58	NA	NA	27.45	28.81	090
35693		A	Arterial transposition	15.58	NA	NA	6.45	7.42	2.21	NA	NA	24.24	25.21	090
35694		A	Arterial transposition	19.13	NA	NA	6.86	8.18	2.69	NA	NA	28.68	30.00	090
35695		A	Arterial transposition	19.91	NA	NA	6.96	8.17	2.73	NA	NA	29.60	30.81	090
35697		A	Reimplant artery each	3.00	NA	NA	0.80	0.97	0.41	NA	NA	4.21	4.38	ZZZ
35700		A	Reoperation, bypass graft	3.08	NA	NA	0.82	0.97	0.44	NA	NA	4.34	4.49	ZZZ
35701		A	Exploration, carotid artery	9.07	NA	NA	4.35	4.96	1.12	NA	NA	14.54	15.15	090
35721		A	Exploration, femoral artery	7.62	NA	NA	3.84	4.29	1.03	NA	NA	12.49	12.94	090
35741		A	Exploration popliteal artery	8.57	NA	NA	4.09	4.53	1.12	NA	NA	13.78	14.22	090
35761		A	Exploration of artery/vein	5.78	NA	NA	3.57	3.91	0.75	NA	NA	10.10	10.44	090
35800		A	Explore neck vessels	7.94	NA	NA	4.06	4.51	0.95	NA	NA	12.95	13.40	090
35820		A	Explore chest vessels	30.08	NA	NA	11.49	8.29	1.94	NA	NA	43.51	40.31	090
35840		A	Explore abdominal vessels	10.81	NA	NA	4.91	5.20	1.34	NA	NA	17.06	17.35	090
35860		A	Explore limb vessels	6.66	NA	NA	3.66	3.95	0.78	NA	NA	11.10	11.39	090
35870		A	Repair vessel graft defect	24.31	NA	NA	8.48	9.46	3.00	NA	NA	35.79	36.77	090
35875		A	Removal of clot in graft	10.60	NA	NA	4.55	5.04	1.41	NA	NA	16.56	17.05	090
35876		A	Removal of clot in graft	17.70	NA	NA	6.37	7.24	2.39	NA	NA	26.46	27.33	090
35879		A	Revise graft w/vein	17.24	NA	NA	6.34	7.37	2.27	NA	NA	25.85	26.88	090
35881		A	Revise graft w/vein	19.16	NA	NA	7.00	8.27	2.55	NA	NA	28.71	29.98	090
35901		A	Excision, graft, neck	8.18	NA	NA	4.41	5.09	1.15	NA	NA	13.74	14.42	090
35903		A	Excision, graft, extremity	9.38	NA	NA	5.27	5.95	1.30	NA	NA	15.95	16.63	090
35905		A	Excision, graft, thorax	33.33	NA	NA	11.04	12.68	4.43	NA	NA	48.80	50.44	090
35907		A	Excision, graft, abdomen	37.08	NA	NA	11.75	13.59	4.91	NA	NA	53.74	55.58	090
36000		A	Place needle in vein	0.18	0.47	0.55	0.06	0.05	0.01	0.66	0.74	0.25	0.24	XXX
36002		A	Pseudoaneurysm injection trt	1.96	2.33	2.74	0.88	0.95	0.17	4.46	4.87	3.01	3.08	000
36005		A	Injection ext venography	0.95	8.80	7.95	0.39	0.33	0.05	9.80	8.95	1.39	1.33	000
36010		A	Place catheter in vein	2.43	11.57	17.41	0.79	0.79	0.20	14.20	20.04	3.42	3.42	XXX
36011		A	Place catheter in vein	3.14	20.19	25.97	1.01	1.05	0.27	23.60	29.38	4.42	4.46	XXX
36012		A	Place catheter in vein	3.51	21.19	19.55	1.29	1.22	0.23	24.93	23.29	5.03	4.96	XXX
36013		A	Place catheter in artery	2.52	19.63	20.97	0.98	0.76	0.25	22.40	23.74	3.75	3.53	XXX
36014		A	Place catheter in artery	3.02	19.93	20.12	1.12	1.05	0.19	23.14	23.33	4.33	4.26	XXX
36015		A	Place catheter in artery	3.51	18.70	22.47	1.00	1.14	0.21	22.42	26.19	4.72	4.86	XXX
36100		A	Establish access to artery	3.02	11.49	11.96	1.24	1.14	0.26	14.77	15.24	4.52	4.42	XXX
36120		A	Establish access to artery	2.01	9.57	10.44	0.61	0.64	0.14	11.72	12.59	2.76	2.79	XXX
36140		A	Establish access to artery	2.01	10.78	12.30	0.73	0.66	0.16	12.95	14.47	2.90	2.83	XXX
36145		A	Artery to vein shunt	2.01	10.73	12.13	0.67	0.66	0.11	12.85	14.25	2.79	2.78	XXX
36160		A	Establish access to aorta	2.52	12.09	13.16	0.78	0.83	0.26	14.87	15.94	3.56	3.61	XXX
36200		A	Place catheter in aorta	3.02	14.20	15.97	1.06	1.02	0.24	17.46	19.23	4.32	4.28	XXX
36215		A	Place catheter in artery	4.67	26.82	27.04	1.93	1.69	0.27	31.76	31.98	6.87	6.63	XXX
36216		A	Place catheter in artery	5.27	29.00	29.12	2.12	1.88	0.31	34.58	34.70	7.70	7.46	XXX
36217		A	Place catheter in artery	6.29	47.85	53.66	2.46	2.25	0.44	54.58	60.39	9.19	8.98	XXX
36218		A	Place catheter in artery	1.01	3.91	4.80	0.39	0.35	0.07	4.99	5.88	1.47	1.43	ZZZ
36245		A	Place catheter in artery	4.67	29.77	31.58	2.18	1.81	0.31	34.75	36.56	7.16	6.79	XXX
36246		A	Place catheter in artery	5.27	28.57	29.68	2.07	1.89	0.38	34.22	35.33	7.72	7.54	XXX
36247		A	Place catheter in artery	6.29	47.04	49.00	2.47	2.23	0.47	53.80	55.76	9.23	8.99	XXX
36248		A	Place catheter in artery	1.01	3.31	3.87	0.39	0.35	0.07	4.39	4.95	1.47	1.43	ZZZ
36260		A	Insertion of infusion pump	9.76	NA	NA	4.92	4.90	1.29	NA	NA	15.97	15.95	090
36261		A	Revision of infusion pump	5.50	NA	NA	3.36	3.59	0.70	NA	NA	9.56	9.79	090
36262		A	Removal of infusion pump	4.01	NA	NA	2.74	2.76	0.54	NA	NA	7.29	7.31	090
36400		A	Bl draw < 3 yrs fem/jugular	0.38	0.34	0.30	0.11	0.10	0.03	0.75	0.71	0.52	0.51	XXX
36405		A	Bl draw < 3 yrs scalp vein	0.31	0.28	0.27	0.08	0.08	0.03	0.62	0.61	0.42	0.42	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
36406		A	Bl draw < 3 yrs other vein	0.18	0.30	0.29	0.08	0.06	0.01	0.49	0.48	0.27	0.25	XXX
36410		A	Non-routine bl draw > 3 yrs	0.18	0.32	0.30	0.05	0.05	0.01	0.51	0.49	0.24	0.24	XXX
36420		A	Vein access cutdown < 1 yr	1.01	0.20	0.31	0.20	0.25	0.07	1.28	1.39	1.28	1.33	XXX
36425		A	Vein access cutdown > 1 yr	0.76	NA	NA	0.22	0.22	0.06	NA	NA	1.04	1.04	XXX
36430		A	Blood transfusion service	0.00	0.94	0.99	NA	NA	0.06	1.00	1.05	NA	NA	XXX
36440		A	Bl push transfuse, 2 yr or <	1.03	NA	NA	0.44	0.33	0.10	NA	NA	1.57	1.46	XXX
36450		A	Bl exchange/transfuse, nb	2.23	NA	NA	0.79	0.73	0.21	NA	NA	3.23	3.17	XXX
36455		A	Bl exchange/transfuse non-nb	2.43	NA	NA	0.74	0.94	0.15	NA	NA	3.32	3.52	XXX
36460		A	Transfusion service, fetal	6.58	NA	NA	1.64	2.10	0.79	NA	NA	9.01	9.47	XXX
36470		A	Injection therapy of vein	1.09	2.48	2.64	0.66	0.71	0.12	3.69	3.85	1.87	1.92	010
36471		A	Injection therapy of veins	1.57	2.62	2.97	0.81	0.92	0.19	4.38	4.73	2.57	2.68	010
36475		A	Endovenous rf, 1st vein	6.72	37.50	48.03	2.03	2.41	0.37	44.59	55.12	9.12	9.50	000
36476		A	Endovenous rf, vein add-on	3.38	6.18	7.47	0.92	1.09	0.18	9.74	11.03	4.48	4.65	ZZZ
36478		A	Endovenous laser, 1st vein	6.72	34.37	43.78	2.14	2.44	0.37	41.46	50.87	9.23	9.53	000
36479		A	Endovenous laser vein addon	3.38	6.67	7.68	1.04	1.12	0.18	10.23	11.24	4.60	4.68	ZZZ
36481		A	Insertion of catheter, vein	6.98	3.02	5.07	2.18	2.50	0.55	10.55	12.60	9.71	10.03	000
36500		A	Insertion of catheter, vein	3.51	NA	NA	1.33	1.36	0.20	NA	NA	5.04	5.07	000
36510		A	Insertion of catheter, vein	1.09	1.08	3.20	0.30	0.53	0.10	2.27	4.39	1.49	1.72	000
36511		A	Apheresis wbc	1.74	NA	NA	0.57	0.69	0.08	NA	NA	2.39	2.51	000
36512		A	Apheresis rbc	1.74	NA	NA	0.60	0.71	0.08	NA	NA	2.42	2.53	000
36513		A	Apheresis platelets	1.74	NA	NA	0.50	0.67	0.17	NA	NA	2.41	2.58	000
36514		A	Apheresis plasma	1.74	10.47	15.38	0.52	0.66	0.08	12.29	17.20	2.34	2.48	000
36515		A	Apheresis, adsorp/reinfuse	1.74	45.04	61.13	0.50	0.62	0.08	46.86	62.95	2.32	2.44	000
36516		A	Apheresis, selective	1.22	49.76	75.66	0.37	0.45	0.08	51.06	76.96	1.67	1.75	000
36522		A	Photopheresis	1.67	35.01	33.10	0.85	0.93	0.13	36.81	34.90	2.65	2.73	000
36550		A	Office/outpatient visit, est	0.17	0.33	0.38	0.06	0.31	0.01	0.51	0.56	0.24	0.49	XXX
36555		A	Insert non-tunnel cv cath	2.68	4.17	5.37	0.61	0.75	0.11	6.96	8.16	3.40	3.54	000
36556		A	Insert non-tunnel cv cath	2.50	2.92	4.96	0.57	0.70	0.19	5.61	7.65	3.26	3.39	000
36557		A	Insert tunneled cv cath	5.09	15.41	19.75	2.48	2.62	0.57	21.07	25.41	8.14	8.28	010
36558		A	Insert tunneled cv cath	4.79	15.45	19.69	2.40	2.52	0.57	20.81	25.05	7.76	7.88	010
36560		A	Insert tunneled cv cath	6.24	21.33	27.65	2.55	2.92	0.57	28.14	34.46	9.36	9.73	010
36561		A	Insert tunneled cv cath	5.99	22.76	27.94	2.65	2.88	0.57	29.32	34.50	9.21	9.44	010
36563		A	Insert tunneled cv cath	6.19	23.31	25.94	2.61	2.90	0.84	30.34	32.97	9.64	9.93	010
36565		A	Insert tunneled cv cath	5.99	18.05	23.09	2.55	2.86	0.57	24.61	29.65	9.11	9.42	010
36566		A	Insert tunneled cv cath	6.49	115.6	48.08	2.69	3.01	0.57	122.7	55.14	9.75	10.07	010
36568		A	Insert picc cath	1.92	5.86	7.13	0.58	0.58	0.11	7.89	9.16	2.61	2.61	000
36569		A	Insert picc cath	1.82	4.68	6.69	0.67	0.60	0.19	6.69	8.70	2.68	2.61	000
36570		A	Insert picvad cath	5.31	23.71	30.88	2.42	2.65	0.57	29.59	36.76	8.30	8.53	010
36571		A	Insert picvad cath	5.29	25.38	31.35	2.46	2.66	0.57	31.24	37.21	8.32	8.52	010
36575		A	Repair tunneled cv cath	0.67	3.41	3.90	0.24	0.26	0.20	4.28	4.77	1.11	1.13	000
36576		A	Repair tunneled cv cath	3.19	5.98	6.72	1.57	1.78	0.19	9.36	10.10	4.95	5.16	010
36578		A	Replace tunneled cv cath	3.49	9.39	10.72	2.00	2.23	0.19	13.07	14.40	5.68	5.91	010
36580		A	Replace cvad cath	1.31	4.11	6.25	0.43	0.42	0.19	5.61	7.75	1.93	1.92	000
36581		A	Replace tunneled cv cath	3.43	16.22	18.72	1.77	1.89	0.19	19.84	22.34	5.39	5.51	010
36582		A	Replace tunneled cv cath	5.19	21.14	24.85	2.36	2.74	0.19	26.52	30.23	7.74	8.12	010
36583		A	Replace tunneled cv cath	5.24	21.73	25.02	2.55	2.81	0.19	27.16	30.45	7.98	8.24	010
36584		A	Replace picc cath	1.20	4.16	6.28	0.62	0.57	0.19	5.55	7.67	2.01	1.96	000
36585		A	Replace picvad cath	4.79	23.48	26.80	2.42	2.66	0.19	28.46	31.78	7.40	7.64	010
36589		A	Removal tunneled cv cath	2.27	1.92	2.17	1.26	1.36	0.24	4.43	4.68	3.77	3.87	010
36590		A	Removal tunneled cv cath	3.30	3.68	3.46	1.60	1.69	0.44	7.42	7.20	5.34	5.43	010
36595		A	Mech remov tunneled cv cath	3.59	11.33	15.81	1.43	1.45	0.21	15.13	19.61	5.23	5.25	000
36596		A	Mech remov tunneled cv cath	0.75	2.70	3.45	0.45	0.49	0.05	3.50	4.25	1.25	1.29	000

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
36597		A	Reposition venous catheter	1.21	2.12	2.34	0.45	0.44	0.07	3.40	3.62	1.73	1.72	000
36598		T	Inj w/fluor, eval cv device	0.74	2.33	2.57	0.28	2.06	0.05	3.12	3.36	1.07	2.85	000
36600		A	Withdrawal of arterial blood	0.32	0.49	0.49	0.07	0.09	0.02	0.83	0.83	0.41	0.43	XXX
36620		A	Insertion catheter, artery	1.15	NA	NA	0.17	0.22	0.07	NA	NA	1.39	1.44	000
36625		A	Insertion catheter, artery	2.11	NA	NA	0.49	0.52	0.26	NA	NA	2.86	2.89	000
36640		A	Insertion catheter, artery	2.10	NA	NA	0.90	1.01	0.21	NA	NA	3.21	3.32	000
36660		A	Insertion catheter, artery	1.40	NA	NA	0.19	0.38	0.14	NA	NA	1.73	1.92	000
36680		A	Insert needle, bone cavity	1.20	NA	NA	0.32	0.45	0.11	NA	NA	1.63	1.76	000
36800		A	Insertion of cannula	2.43	NA	NA	1.55	1.75	0.25	NA	NA	4.23	4.43	000
36810		A	Insertion of cannula	3.96	NA	NA	1.37	1.60	0.45	NA	NA	5.78	6.01	000
36815		A	Insertion of cannula	2.62	NA	NA	1.03	1.14	0.35	NA	NA	4.00	4.11	000
36818		A	Av fuse, uppr arm, cephalic	11.77	NA	NA	4.97	5.78	1.89	NA	NA	18.63	19.44	090
36819		A	Av fuse, uppr arm, basilic	14.35	NA	NA	5.34	6.13	1.95	NA	NA	21.64	22.43	090
36820		A	Av fusion/forearm vein	14.35	NA	NA	5.40	6.15	1.94	NA	NA	21.69	22.44	090
36821		A	Av fusion direct any site	9.10	NA	NA	4.09	4.52	1.23	NA	NA	14.42	14.85	090
36822		A	Insertion of cannula(s)	5.47	NA	NA	3.85	4.26	0.79	NA	NA	10.11	10.52	090
36823		A	Insertion of cannula(s)	22.74	NA	NA	8.87	9.27	2.88	NA	NA	34.49	34.89	090
36825		A	Artery-vein autograft	9.95	NA	NA	4.37	4.89	1.35	NA	NA	15.67	16.19	090
36830		A	Artery-vein nonautograft	11.98	NA	NA	4.31	5.02	1.66	NA	NA	17.95	18.66	090
36831		A	Open thrombect av fistula	7.99	NA	NA	3.38	3.81	1.09	NA	NA	12.46	12.89	090
36832		A	Av fistula revision, open	10.48	NA	NA	3.91	4.53	1.44	NA	NA	15.83	16.45	090
36833		A	Av fistula revision	11.93	NA	NA	4.31	4.99	1.65	NA	NA	17.89	18.57	090
36834		A	Repair A-V aneurysm	11.07	NA	NA	4.40	4.70	1.37	NA	NA	16.84	17.14	090
36835		A	Artery to vein shunt	7.38	NA	NA	3.93	4.23	0.98	NA	NA	12.29	12.59	090
36838		A	Dist revas ligation, hemo	21.55	NA	NA	7.32	8.89	3.01	NA	NA	31.88	33.45	090
36860		A	External cannula declotting	2.01	3.36	2.18	0.61	0.66	0.11	5.48	4.30	2.73	2.78	000
36861		A	Cannula declotting	2.52	NA	NA	1.27	1.44	0.27	NA	NA	4.06	4.23	000
36870		A	Percut thrombect av fistula	5.15	42.53	50.52	2.83	3.08	0.29	47.97	55.96	8.27	8.52	090
37140		A	Revision of circulation	25.04	NA	NA	9.21	10.19	2.01	NA	NA	36.26	37.24	090
37145		A	Revision of circulation	26.05	NA	NA	8.94	10.40	3.25	NA	NA	38.24	39.70	090
37160		A	Revision of circulation	23.05	NA	NA	8.28	9.03	2.81	NA	NA	34.14	34.89	090
37180		A	Revision of circulation	26.05	NA	NA	8.97	9.98	3.34	NA	NA	38.36	39.37	090
37181		A	Splice spleen/kidney veins	28.18	NA	NA	9.33	10.61	3.40	NA	NA	40.91	42.19	090
37182		A	Insert hepatic shunt (tips)	16.97	NA	NA	6.32	6.14	1.00	NA	NA	24.29	24.11	000
37183		A	Remove hepatic shunt (tips)	7.99	NA	NA	3.09	3.04	0.47	NA	NA	11.55	11.50	000
37184		A	Prim art mech thrombectomy	8.66	51.62	66.83	3.22	3.33	0.55	60.83	76.04	12.43	12.54	000
37185		A	Prim art m-thrombect add-on	3.28	16.78	21.41	1.10	1.11	0.21	20.27	24.90	4.59	4.60	ZZZ
37186		A	Sec art m-thrombect add-on	4.92	35.40	46.00	1.64	1.66	0.32	40.64	51.24	6.88	6.90	ZZZ
37187		A	Venous mech thrombectomy	8.03	50.43	65.39	3.01	3.12	0.51	58.97	73.93	11.55	11.66	000
37188		A	Venous m-thrombectomy add-on	5.71	43.99	57.61	2.23	2.34	0.37	50.07	63.69	8.31	8.42	000
37200		A	Transcatheter biopsy	4.55	NA	NA	1.65	1.54	0.27	NA	NA	6.47	6.36	000
37201		A	Transcatheter therapy infuse	4.99	NA	NA	2.40	2.51	0.33	NA	NA	7.72	7.83	000
37202		A	Transcatheter therapy infuse	5.67	NA	NA	3.47	3.15	0.43	NA	NA	9.57	9.25	000
37203		A	Transcatheter retrieval	5.02	31.47	32.60	2.10	2.06	0.29	36.78	37.91	7.41	7.37	000
37204		A	Transcatheter occlusion	18.11	NA	NA	6.29	6.01	1.48	NA	NA	25.88	25.60	000
37205		A	Transcath iv stent, percut	8.27	NA	NA	4.08	3.84	0.60	NA	NA	12.95	12.71	000
37206		A	Transcath iv stent/perc addl	4.12	NA	NA	1.67	1.49	0.31	NA	NA	6.10	5.92	ZZZ
37207		A	Transcath iv stent, open	8.27	NA	NA	2.52	3.01	1.17	NA	NA	11.96	12.45	000
37208		A	Transcath iv stent/open addl	4.12	NA	NA	1.10	1.31	0.59	NA	NA	5.81	6.02	ZZZ
37209		A	Change iv cath at thromb tx	2.27	NA	NA	0.80	0.76	0.15	NA	NA	3.22	3.18	000
37215		R	Transcath stent, cca w/eps	19.54	NA	NA	10.47	9.46	1.09	NA	NA	31.10	30.09	090
37216		N	Transcath stent, cca w/o eps	18.81	NA	NA	9.14	8.92	1.04	NA	NA	28.99	28.77	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
37250		A	Iv us first vessel add-on	2.10	NA	NA	0.83	0.77	0.21	NA	NA	3.14	3.08	ZZZ
37251		A	Iv us each add vessel add-on	1.60	NA	NA	0.54	0.55	0.19	NA	NA	2.33	2.34	ZZZ
37500		A	Endoscopy ligate perf veins	11.48	NA	NA	5.54	6.54	1.54	NA	NA	18.56	19.56	090
37565		A	Ligation of neck vein	11.93	NA	NA	5.11	5.51	1.33	NA	NA	18.37	18.77	090
37600		A	Ligation of neck artery	12.30	NA	NA	4.94	6.22	1.41	NA	NA	18.65	19.93	090
37605		A	Ligation of neck artery	14.16	NA	NA	5.69	6.61	1.98	NA	NA	21.83	22.75	090
37606		A	Ligation of neck artery	8.65	NA	NA	5.03	4.69	1.23	NA	NA	14.91	14.57	090
37607		A	Ligation of a-v fistula	6.15	NA	NA	3.14	3.46	0.85	NA	NA	10.14	10.46	090
37609		A	Temporal artery procedure	3.00	4.22	4.44	1.82	1.93	0.36	7.58	7.80	5.18	5.29	010
37615		A	Ligation of neck artery	7.67	NA	NA	3.97	4.08	0.68	NA	NA	12.32	12.43	090
37616		A	Ligation of chest artery	18.84	NA	NA	8.00	8.08	2.32	NA	NA	29.16	29.24	090
37617		A	Ligation of abdomen artery	23.67	NA	NA	7.93	8.88	2.97	NA	NA	34.57	35.52	090
37618		A	Ligation of extremity artery	5.89	NA	NA	3.43	3.57	0.67	NA	NA	9.99	10.13	090
37620		A	Revision of major vein	11.44	NA	NA	5.57	5.69	0.91	NA	NA	17.92	18.04	090
37650		A	Revision of major vein	8.37	NA	NA	4.29	4.59	1.01	NA	NA	13.67	13.97	090
37660		A	Revision of major vein	22.16	NA	NA	8.33	8.89	2.48	NA	NA	32.97	33.53	090
37700		A	Revise leg vein	3.72	NA	NA	2.48	2.72	0.53	NA	NA	6.73	6.97	090
37718		A	Ligate/strip short leg vein	7.01	NA	NA	3.56	3.94	0.14	NA	NA	10.71	11.09	090
37722		A	Ligate/strip long leg vein	8.04	NA	NA	3.83	4.27	0.86	NA	NA	12.73	13.17	090
37735		A	Removal of leg veins/lesion	10.75	NA	NA	4.73	5.32	1.48	NA	NA	16.96	17.55	090
37760		A	Ligation, leg veins, open	10.63	NA	NA	4.60	5.17	1.44	NA	NA	16.67	17.24	090
37765		A	Phleb veins - extrem - to 20	7.59	NA	NA	3.66	4.39	0.48	NA	NA	11.73	12.46	090
37766		A	Phleb veins - extrem 20+	9.54	NA	NA	4.21	5.06	0.48	NA	NA	14.23	15.08	090
37780		A	Revision of leg vein	3.83	NA	NA	2.53	2.78	0.53	NA	NA	6.89	7.14	090
37785		A	Ligate/divide/excise vein	3.83	5.00	5.16	2.62	2.70	0.54	9.37	9.53	6.99	7.07	090
37788		A	Revascularization, penis	23.13	NA	NA	12.17	9.88	2.25	NA	NA	37.55	35.26	090
37790		A	Penile venous occlusion	8.33	NA	NA	5.20	4.59	0.59	NA	NA	14.12	13.51	090
38100		A	Removal of spleen, total	19.43	NA	NA	6.85	6.36	1.91	NA	NA	28.19	27.70	090
38101		A	Removal of spleen, partial	19.43	NA	NA	7.33	6.74	2.04	NA	NA	28.80	28.21	090
38102		A	Removal of spleen, total	4.79	NA	NA	1.25	1.54	0.63	NA	NA	6.67	6.96	ZZZ
38115		A	Repair of ruptured spleen	21.76	NA	NA	7.50	6.87	2.08	NA	NA	31.34	30.71	090
38120		A	Laparoscopy, splenectomy	16.97	NA	NA	6.90	7.28	2.24	NA	NA	26.11	26.49	090
38200		A	Injection for spleen x-ray	2.64	NA	NA	1.03	0.93	0.14	NA	NA	3.81	3.71	000
38205		R	Harvest allogenic stem cells	1.50	NA	NA	0.54	0.64	0.07	NA	NA	2.11	2.21	000
38206		R	Harvest auto stem cells	1.50	NA	NA	0.53	0.64	0.07	NA	NA	2.10	2.21	000
38220		A	Bone marrow aspiration	1.08	2.69	3.47	0.44	0.50	0.05	3.82	4.60	1.57	1.63	XXX
38221		A	Bone marrow biopsy	1.37	2.81	3.66	0.57	0.63	0.07	4.25	5.10	2.01	2.07	XXX
38230		R	Bone marrow collection	4.78	NA	NA	2.73	3.11	0.48	NA	NA	7.99	8.37	010
38240		R	Bone marrow/stem transplant	2.24	NA	NA	0.94	1.01	0.11	NA	NA	3.29	3.36	XXX
38241		R	Bone marrow/stem transplant	2.24	NA	NA	0.93	1.01	0.11	NA	NA	3.28	3.36	XXX
38242		A	Lymphocyte infuse transplant	1.71	NA	NA	0.70	0.76	0.08	NA	NA	2.49	2.55	000
38300		A	Drainage, lymph node lesion	2.24	3.74	4.17	1.81	2.00	0.25	6.23	6.66	4.30	4.49	010
38305		A	Drainage, lymph node lesion	6.49	NA	NA	3.58	4.23	0.88	NA	NA	10.95	11.60	090
38308		A	Incision of lymph channels	6.69	NA	NA	3.56	3.70	0.85	NA	NA	11.10	11.24	090
38380		A	Thoracic duct procedure	8.26	NA	NA	4.63	5.43	0.74	NA	NA	13.63	14.43	090
38381		A	Thoracic duct procedure	13.28	NA	NA	6.16	6.72	1.84	NA	NA	21.28	21.84	090
38382		A	Thoracic duct procedure	10.42	NA	NA	5.50	5.70	1.37	NA	NA	17.29	17.49	090
38500		A	Biopsy/removal, lymph nodes	3.74	3.75	3.71	2.02	2.07	0.49	7.98	7.94	6.25	6.30	010
38505		A	Needle biopsy, lymph nodes	1.14	2.14	2.08	0.72	0.77	0.09	3.37	3.31	1.95	2.00	000
38510		A	Biopsy/removal, lymph nodes	6.67	5.16	5.46	2.92	3.35	0.72	12.55	12.85	10.31	10.74	010
38520		A	Biopsy/removal, lymph nodes	6.91	NA	NA	3.68	3.97	0.84	NA	NA	11.43	11.72	090
38525		A	Biopsy/removal, lymph nodes	6.31	NA	NA	3.46	3.34	0.80	NA	NA	10.57	10.45	090

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CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
38530		A	Biopsy/removal, lymph nodes	8.22	NA	NA	4.10	4.33	1.12	NA	NA	13.44	13.67	090
38542		A	Explore deep node(s), neck	6.02	NA	NA	3.69	4.29	0.60	NA	NA	10.31	10.91	090
38550		A	Removal, neck/armpit lesion	6.91	NA	NA	4.21	3.99	0.88	NA	NA	12.00	11.78	090
38555		A	Removal, neck/armpit lesion	15.30	NA	NA	7.18	8.21	1.75	NA	NA	24.23	25.26	090
38562		A	Removal, pelvic lymph nodes	10.83	NA	NA	5.74	5.78	1.20	NA	NA	17.77	17.81	090
38564		A	Removal, abdomen lymph nodes	11.23	NA	NA	5.21	5.25	1.32	NA	NA	17.76	17.80	090
38570		A	Laparoscopy, lymph node biop	9.24	NA	NA	3.99	3.98	1.13	NA	NA	14.36	14.35	010
38571		A	Laparoscopy, lymphadenectomy	14.66	NA	NA	7.03	6.00	1.15	NA	NA	22.84	21.81	010
38572		A	Laparoscopy, lymphadenectomy	16.82	NA	NA	6.08	6.84	1.90	NA	NA	24.80	25.56	010
38700		A	Removal of lymph nodes, neck	12.62	NA	NA	5.93	6.17	0.72	NA	NA	19.27	19.51	090
38720		A	Removal of lymph nodes, neck	21.64	NA	NA	8.82	9.24	1.20	NA	NA	31.66	32.08	090
38724		A	Removal of lymph nodes, neck	23.64	NA	NA	9.38	9.74	1.28	NA	NA	34.30	34.66	090
38740		A	Remove armpit lymph nodes	10.51	NA	NA	4.96	4.95	1.32	NA	NA	16.79	16.78	090
38745		A	Remove armpit lymph nodes	13.65	NA	NA	5.99	6.07	1.73	NA	NA	21.37	21.45	090
38746		A	Remove thoracic lymph nodes	4.88	NA	NA	1.46	1.57	0.72	NA	NA	7.06	7.17	ZZZ
38747		A	Remove abdominal lymph nodes	4.88	NA	NA	1.26	1.57	0.64	NA	NA	6.78	7.09	ZZZ
38760		A	Remove groin lymph nodes	13.43	NA	NA	5.89	6.08	1.71	NA	NA	21.03	21.22	090
38765		A	Remove groin lymph nodes	21.72	NA	NA	8.71	8.80	2.47	NA	NA	32.90	32.99	090
38770		A	Remove pelvis lymph nodes	13.93	NA	NA	6.96	6.06	1.40	NA	NA	22.29	21.39	090
38780		A	Remove abdomen lymph nodes	17.47	NA	NA	7.92	8.15	1.88	NA	NA	27.27	27.50	090
38790		A	Inject for lymphatic x-ray	1.29	5.25	6.84	0.75	0.76	0.13	6.67	8.26	2.17	2.18	000
38792		A	Identify sentinel node	0.52	NA	NA	0.49	0.45	0.06	NA	NA	1.07	1.03	000
38794		A	Access thoracic lymph duct	4.44	NA	NA	3.24	3.41	0.32	NA	NA	8.00	8.17	090
39000		A	Exploration of chest	7.45	NA	NA	4.40	4.60	0.89	NA	NA	12.74	12.94	090
39010		A	Exploration of chest	13.07	NA	NA	6.23	7.23	1.75	NA	NA	21.05	22.05	090
39200		A	Removal chest lesion	15.02	NA	NA	6.30	7.24	2.02	NA	NA	23.34	24.28	090
39220		A	Removal chest lesion	18.42	NA	NA	7.69	8.97	2.45	NA	NA	28.56	29.84	090
39400		A	Visualization of chest	5.97	NA	NA	3.65	4.56	0.82	NA	NA	10.44	11.35	010
39501		A	Repair diaphragm laceration	13.83	NA	5.87	6.32	1.77	NA	NA	21.47	21.92	090	
39502		A	Repair paraesophageal hernia	17.03	NA	NA	6.55	7.01	2.16	NA	NA	25.74	26.20	090
39503		A	Repair of diaphragm hernia	108.57	NA	NA	31.89	33.08	10.95	NA	NA	151.4	152.6	090
39520		A	Repair of diaphragm hernia	16.56	NA	NA	6.87	7.76	2.23	NA	NA	25.66	26.55	090
39530		A	Repair of diaphragm hernia	16.17	NA	NA	6.35	6.95	2.10	NA	NA	24.62	25.22	090
39531		A	Repair of diaphragm hernia	17.18	NA	NA	6.56	7.19	2.21	NA	NA	25.95	26.58	090
39540		A	Repair of diaphragm hernia	14.47	NA	NA	5.56	6.07	1.79	NA	NA	21.82	22.33	090
39541		A	Repair of diaphragm hernia	15.62	NA	NA	6.13	6.48	1.92	NA	NA	23.67	24.02	090
39545		A	Revision of diaphragm	14.52	NA	NA	7.28	7.49	1.83	NA	NA	23.63	23.84	090
39560		A	Resect diaphragm, simple	12.91	NA	NA	5.55	6.11	1.59	NA	NA	20.05	20.61	090
39561		A	Resect diaphragm, complex	19.69	NA	NA	9.43	9.38	2.44	NA	NA	31.56	31.51	090
40490		A	Biopsy of lip	1.22	2.04	1.73	0.56	0.60	0.05	3.31	3.00	1.83	1.87	000
40500		A	Partial excision of lip	4.27	7.63	7.09	4.16	4.30	0.38	12.28	11.74	8.81	8.95	090
40510		A	Partial excision of lip	4.69	6.48	6.59	3.44	3.88	0.49	11.66	11.77	8.62	9.06	090
40520		A	Partial excision of lip	4.66	6.74	7.36	3.64	4.00	0.52	11.92	12.54	8.82	9.18	090
40525		A	Reconstruct lip with flap	7.54	NA	NA	5.14	6.03	0.85	NA	NA	13.53	14.42	090
40527		A	Reconstruct lip with flap	9.12	NA	NA	5.75	6.97	0.97	NA	NA	15.84	17.06	090
40530		A	Partial removal of lip	5.39	7.19	7.67	4.01	4.45	0.55	13.13	13.61	9.95	10.39	090
40650		A	Repair lip	3.63	5.86	6.57	3.09	3.25	0.38	9.87	10.58	7.10	7.26	090
40652		A	Repair lip	4.25	6.94	7.56	3.92	4.18	0.52	11.71	12.33	8.69	8.95	090
40654		A	Repair lip	5.30	7.92	8.45	4.55	4.84	0.60	13.82	14.35	10.45	10.74	090
40700		A	Repair cleft lip/nasal	13.89	NA	NA	9.24	9.14	0.95	NA	NA	24.08	23.98	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
40701		A	Repair cleft lip/nasal	16.95	NA	NA	10.87	11.24	1.65	NA	NA	29.47	29.84	090
40702		A	Repair cleft lip/nasal	14.01	NA	NA	7.06	7.97	1.23	NA	NA	22.30	23.21	090
40720		A	Repair cleft lip/nasal	14.46	NA	NA	8.73	9.62	1.79	NA	NA	24.98	25.87	090
40761		A	Repair cleft lip/nasal	15.63	NA	NA	8.62	9.88	1.93	NA	NA	26.18	27.44	090
40800		A	Drainage of mouth lesion	1.17	3.84	3.19	1.87	1.80	0.13	5.14	4.49	3.17	3.10	010
40801		A	Drainage of mouth lesion	2.53	4.84	4.23	2.54	2.70	0.31	7.68	7.07	5.38	5.54	010
40804		A	Removal, foreign body, mouth	1.24	3.62	3.46	1.75	1.83	0.11	4.97	4.81	3.10	3.18	010
40805		A	Removal, foreign body, mouth	2.69	5.04	4.63	2.55	2.75	0.32	8.05	7.64	5.56	5.76	010
40806		A	Incision of lip fold	0.31	2.38	1.98	0.50	0.50	0.04	2.73	2.33	0.85	0.85	000
40808		A	Biopsy of mouth lesion	0.96	3.51	2.87	1.57	1.50	0.10	4.57	3.93	2.63	2.56	010
40810		A	Excision of mouth lesion	1.31	3.55	3.06	1.65	1.66	0.13	4.99	4.50	3.09	3.10	010
40812		A	Excise/repair mouth lesion	2.31	4.50	3.92	2.25	2.37	0.28	7.09	6.51	4.84	4.96	010
40814		A	Excise/repair mouth lesion	3.41	5.61	5.12	3.63	3.83	0.41	9.43	8.94	7.45	7.65	090
40816		A	Excision of mouth lesion	3.66	5.77	5.33	3.67	3.93	0.40	9.83	9.39	7.73	7.99	090
40818		A	Excise oral mucosa for graft	2.66	5.73	5.32	3.67	3.90	0.21	8.60	8.19	6.54	6.77	090
40819		A	Excise lip or cheek fold	2.41	4.87	4.29	3.06	3.09	0.29	7.57	6.99	5.76	5.79	090
40820		A	Treatment of mouth lesion	1.28	5.11	4.23	2.82	2.54	0.11	6.50	5.62	4.21	3.93	010
40830		A	Repair mouth laceration	1.76	4.07	3.82	1.99	2.07	0.19	6.02	5.77	3.94	4.02	010
40831		A	Repair mouth laceration	2.46	5.30	4.83	2.71	2.97	0.30	8.06	7.59	5.47	5.73	010
40840		R	Reconstruction of mouth	8.97	9.90	9.83	5.46	6.61	1.08	19.95	19.88	15.51	16.66	090
40842		R	Reconstruction of mouth	8.97	9.68	9.99	5.29	6.42	1.08	19.73	20.04	15.34	16.47	090
40843		R	Reconstruction of mouth	12.56	11.83	11.94	6.07	7.39	1.39	25.78	25.89	20.02	21.34	090
40844		R	Reconstruction of mouth	16.47	14.78	15.55	8.74	10.88	1.99	33.24	34.01	27.20	29.34	090
40845		R	Reconstruction of mouth	19.03	14.86	16.55	9.31	12.27	2.00	35.89	37.58	30.34	33.30	090
41000		A	Drainage of mouth lesion	1.30	2.48	2.36	1.28	1.38	0.12	3.90	3.78	2.70	2.80	010
41005		A	Drainage of mouth lesion	1.26	4.22	3.56	1.71	1.72	0.12	5.60	4.94	3.09	3.10	010
41006		A	Drainage of mouth lesion	3.24	5.27	4.92	2.71	3.06	0.35	8.86	8.51	6.30	6.65	090
41007		A	Drainage of mouth lesion	3.10	5.31	5.19	2.69	2.95	0.31	8.72	8.60	6.10	6.36	090
41008		A	Drainage of mouth lesion	3.36	5.39	4.87	2.77	3.10	0.42	9.17	8.65	6.55	6.88	090
41009		A	Drainage of mouth lesion	3.58	5.78	5.18	3.10	3.46	0.47	9.83	9.23	7.15	7.51	090
41010		A	Incision of tongue fold	1.06	3.49	3.45	1.40	1.55	0.07	4.62	4.58	2.53	2.68	010
41015		A	Drainage of mouth lesion	3.95	6.19	5.61	3.91	4.09	0.46	10.60	10.02	8.32	8.50	090
41016		A	Drainage of mouth lesion	4.06	6.12	5.75	3.99	4.17	0.53	10.71	10.34	8.58	8.76	090
41017		A	Drainage of mouth lesion	4.06	6.29	5.81	4.06	4.25	0.53	10.88	10.40	8.65	8.84	090
41018		A	Drainage of mouth lesion	5.09	6.51	6.24	4.29	4.51	0.68	12.28	12.01	10.06	10.28	090
41100		A	Biopsy of tongue	1.37	2.58	2.47	1.12	1.35	0.15	4.10	3.99	2.64	2.87	010
41105		A	Biopsy of tongue	1.42	2.54	2.37	1.12	1.27	0.13	4.09	3.92	2.67	2.82	010
41108		A	Biopsy of floor of mouth	1.05	2.38	2.16	1.01	1.10	0.10	3.53	3.31	2.16	2.25	010
41110		A	Excision of tongue lesion	1.51	3.43	3.10	1.52	1.61	0.13	5.07	4.74	3.16	3.25	010
41112		A	Excision of tongue lesion	2.73	5.07	4.63	3.11	3.20	0.28	8.08	7.64	6.12	6.21	090
41113		A	Excision of tongue lesion	3.19	5.36	4.90	3.28	3.43	0.34	8.89	8.43	6.81	6.96	090
41114		A	Excision of tongue lesion	8.64	NA	NA	5.88	6.88	0.83	NA	NA	15.35	16.35	090
41115		A	Excision of tongue fold	1.74	4.26	3.54	1.74	1.83	0.18	6.18	5.46	3.66	3.75	010
41116		A	Excision of mouth lesion	2.44	5.28	4.59	2.63	2.77	0.23	7.95	7.26	5.30	5.44	090
41120		A	Partial removal of tongue	10.83	NA	NA	13.77	14.96	0.79	NA	NA	25.39	26.58	090
41130		A	Partial removal of tongue	15.43	NA	NA	15.08	15.95	0.93	NA	NA	31.44	32.31	090
41135		A	Tongue and neck surgery	29.71	NA	NA	19.78	22.41	1.88	NA	NA	51.37	54.00	090
41140		A	Removal of tongue	28.69	NA	NA	21.51	25.44	2.26	NA	NA	52.46	56.39	090
41145		A	Tongue removal, neck surgery	37.47	NA	NA	26.58	29.62	2.54	NA	NA	66.59	69.63	090
41150		A	Tongue, mouth, jaw surgery	29.40	NA	NA	21.26	23.90	1.94	NA	NA	52.60	55.24	090
41153		A	Tongue, mouth, neck surgery	33.16	NA	NA	22.28	24.39	2.00	NA	NA	57.44	59.55	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
41155		A	Tongue, jaw, & neck surgery	39.84	NA	NA	23.96	26.15	2.33	NA	NA	66.13	68.32	090
41250		A	Repair tongue laceration	1.91	3.76	3.00	1.57	1.28	0.18	5.85	5.09	3.66	3.37	010
41251		A	Repair tongue laceration	2.27	3.12	3.24	1.62	1.57	0.22	5.61	5.73	4.11	4.06	010
41252		A	Repair tongue laceration	2.97	4.31	4.00	1.94	2.18	0.29	7.57	7.26	5.20	5.44	010
41500		A	Fixation of tongue	3.70	NA	NA	6.46	7.22	0.30	NA	NA	10.46	11.22	090
41510		A	Tongue to lip surgery	3.41	NA	NA	6.94	7.70	0.20	NA	NA	10.55	11.31	090
41520		A	Reconstruction, tongue fold	2.73	5.71	4.90	3.19	3.52	0.27	8.71	7.90	6.19	6.52	090
41800		A	Drainage of gum lesion	1.17	4.75	3.14	2.09	1.48	0.12	6.04	4.43	3.38	2.77	010
41805		A	Removal foreign body, gum	1.24	4.73	3.19	2.75	2.35	0.13	6.10	4.56	4.12	3.72	010
41806		A	Removal foreign body,jawbone	2.69	5.89	4.17	3.37	3.12	0.37	8.95	7.23	6.43	6.18	010
41822		R	Excision of gum lesion	2.31	4.67	4.09	1.78	1.86	0.31	7.29	6.71	4.40	4.48	010
41823		R	Excision of gum lesion	3.55	6.52	5.82	3.76	3.96	0.47	10.54	9.84	7.78	7.98	090
41825		A	Excision of gum lesion	1.31	3.61	3.21	1.42	2.04	0.15	5.07	4.67	2.88	3.50	010
41826		A	Excision of gum lesion	2.31	5.12	3.11	2.58	2.23	0.30	7.73	5.72	5.19	4.84	010
41827		A	Excision of gum lesion	3.66	6.61	5.80	3.35	3.59	0.35	10.62	9.81	7.36	7.60	090
41828		R	Excision of gum lesion	3.09	4.13	3.89	1.65	2.64	0.44	7.66	7.42	5.18	6.17	010
41830		R	Removal of gum tissue	3.34	6.05	5.24	3.14	3.51	0.44	9.83	9.02	6.92	7.29	010
41872		R	Repair gum	2.84	5.80	5.22	3.19	3.40	0.30	8.94	8.36	6.33	6.54	090
41874		R	Repair tooth socket	3.09	5.76	5.08	2.76	3.08	0.45	9.30	8.62	6.30	6.62	090
42000		A	Drainage mouth roof lesion	1.23	2.31	2.51	1.12	1.22	0.12	3.66	3.86	2.47	2.57	010
42100		A	Biopsy roof of mouth	1.31	2.16	2.11	1.19	1.32	0.13	3.60	3.55	2.63	2.76	010
42104		A	Excision lesion, mouth roof	1.64	3.41	2.77	1.57	1.56	0.16	5.21	4.57	3.37	3.36	010
42106		A	Excision lesion, mouth roof	2.10	4.40	3.52	2.03	2.35	0.25	6.75	5.87	4.38	4.70	010
42107		A	Excision lesion, mouth roof	4.43	6.27	5.87	3.51	3.85	0.44	11.14	10.74	8.38	8.72	090
42120		A	Remove palate/lesion	11.62	NA	NA	12.17	11.89	0.52	NA	NA	24.31	24.03	090
42140		A	Excision of uvula	1.62	4.18	3.84	1.90	2.05	0.13	5.93	5.59	3.65	3.80	090
42145		A	Repair palate, pharynx/uvula	9.57	NA	NA	6.64	7.29	0.65	NA	NA	16.86	17.51	090
42160		A	Treatment mouth roof lesion	1.80	3.59	4.09	1.58	2.12	0.17	5.56	6.06	3.55	4.09	010
42180		A	Repair palate	2.50	3.19	3.11	1.75	2.02	0.21	5.90	5.82	4.46	4.73	010
42182		A	Repair palate	3.82	3.95	3.90	2.32	2.86	0.40	8.17	8.12	6.54	7.08	010
42200		A	Reconstruct cleft palate	12.35	NA	NA	7.99	9.68	1.27	NA	NA	21.61	23.30	090
42205		A	Reconstruct cleft palate	13.51	NA	NA	7.37	9.42	1.58	NA	NA	22.46	24.51	090
42210		A	Reconstruct cleft palate	14.85	NA	NA	9.59	11.02	2.16	NA	NA	26.60	28.03	090
42215		A	Reconstruct cleft palate	8.81	NA	NA	7.08	8.60	1.31	NA	NA	17.20	18.72	090
42220		A	Reconstruct cleft palate	7.01	NA	NA	6.72	6.78	0.73	NA	NA	14.46	14.52	090
42225		A	Reconstruct cleft palate	9.59	NA	NA	11.81	15.79	0.86	NA	NA	22.26	26.24	090
42226		A	Lengthening of palate	10.17	NA	NA	11.17	13.85	1.01	NA	NA	22.35	25.03	090
42227		A	Lengthening of palate	9.75	NA	NA	9.54	14.08	0.98	NA	NA	20.27	24.81	090
42235		A	Repair palate	7.86	NA	NA	10.32	11.50	0.72	NA	NA	18.90	20.08	090
42260		A	Repair nose to lip fistula	10.04	9.41	10.02	5.71	6.74	1.26	20.71	21.32	17.01	18.04	090
42280		A	Preparation, palate mold	1.54	2.26	2.04	0.84	1.07	0.19	3.99	3.77	2.57	2.80	010
42281		A	Insertion, palate prosthesis	1.93	2.79	2.68	1.53	1.79	0.17	4.89	4.78	3.63	3.89	010
42300		A	Drainage of salivary gland	1.93	2.89	2.85	1.58	1.76	0.16	4.98	4.94	3.67	3.85	010
42305		A	Drainage of salivary gland	6.18	NA	NA	3.59	4.45	0.51	NA	NA	10.28	11.14	090
42310		A	Drainage of salivary gland	1.56	2.16	2.24	1.30	1.48	0.13	3.85	3.93	2.99	3.17	010
42320		A	Drainage of salivary gland	2.35	3.51	3.34	1.74	2.01	0.21	6.07	5.90	4.30	4.57	010
42330		A	Removal of salivary stone	2.21	3.15	3.15	1.57	1.78	0.19	5.55	5.55	3.97	4.18	010
42335		A	Removal of salivary stone	3.31	5.38	5.03	2.62	3.02	0.29	8.98	8.63	6.22	6.62	090
42340		A	Removal of salivary stone	4.59	6.22	6.10	3.17	3.75	0.42	11.23	11.11	8.18	8.76	090
42400		A	Biopsy of salivary gland	0.78	1.91	1.72	0.60	0.69	0.06	2.75	2.56	1.44	1.53	000
42405		A	Biopsy of salivary gland	3.29	3.66	3.92	1.95	2.33	0.28	7.23	7.49	5.52	5.90	010
42408		A	Excision of salivary cyst	4.53	6.03	5.96	3.02	3.47	0.45	11.01	10.94	8.00	8.45	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
42409		A	Drainage of salivary cyst	2.81	5.02	4.65	2.35	2.67	0.27	8.10	7.73	5.43	5.75	090
42410		A	Excise parotid gland/lesion	9.39	NA	NA	4.81	5.88	0.91	NA	NA	15.11	16.18	090
42415		A	Excise parotid gland/lesion	17.91	NA	NA	7.53	10.05	1.43	NA	NA	26.87	29.39	090
42420		A	Excise parotid gland/lesion	20.79	NA	NA	8.32	11.39	1.65	NA	NA	30.76	33.83	090
42425		A	Excise parotid gland/lesion	13.24	NA	NA	5.92	7.95	1.05	NA	NA	20.21	22.24	090
42426		A	Excise parotid gland/lesion	22.46	NA	NA	8.59	11.94	1.80	NA	NA	32.85	36.20	090
42440		A	Excise submaxillary gland	7.02	NA	NA	3.40	4.45	0.59	NA	NA	11.01	12.06	090
42450		A	Excise sublingual gland	4.61	5.81	5.89	3.61	4.10	0.42	10.84	10.92	8.64	9.13	090
42500		A	Repair salivary duct	4.29	5.73	5.71	3.57	4.04	0.41	10.43	10.41	8.27	8.74	090
42505		A	Repair salivary duct	6.17	6.66	7.02	4.26	5.10	0.55	13.38	13.74	10.98	11.82	090
42507		A	Parotid duct diversion	6.10	NA	NA	5.82	6.37	0.49	NA	NA	12.41	12.96	090
42508		A	Parotid duct diversion	9.15	NA	NA	7.45	8.13	1.04	NA	NA	17.64	18.32	090
42509		A	Parotid duct diversion	11.58	NA	NA	8.61	9.82	0.93	NA	NA	21.12	22.33	090
42510		A	Parotid duct diversion	8.20	NA	NA	6.24	7.42	0.66	NA	NA	15.10	16.28	090
42550		A	Injection for salivary x-ray	1.25	2.36	3.01	0.44	0.42	0.07	3.68	4.33	1.76	1.74	000
42600		A	Closure of salivary fistula	4.81	6.40	6.55	3.27	3.92	0.43	11.64	11.79	8.51	9.16	090
42650		A	Dilation of salivary duct	0.77	1.18	1.12	0.60	0.68	0.07	2.02	1.96	1.44	1.52	000
42660		A	Dilation of salivary duct	1.13	1.43	1.37	0.73	0.82	0.09	2.65	2.59	1.95	2.04	000
42665		A	Ligation of salivary duct	2.53	4.66	4.30	2.17	2.49	0.23	7.42	7.06	4.93	5.25	090
42700		A	Drainage of tonsil abscess	1.62	2.71	2.67	1.49	1.65	0.13	4.46	4.42	3.24	3.40	010
42720		A	Drainage of throat abscess	6.31	4.22	4.69	2.79	3.55	0.44	10.97	11.44	9.54	10.30	010
42725		A	Drainage of throat abscess	12.22	NA	NA	6.46	7.80	0.91	NA	NA	19.59	20.93	090
42800		A	Biopsy of throat	1.39	2.24	2.20	1.16	1.34	0.11	3.74	3.70	2.66	2.84	010
42802		A	Biopsy of throat	1.54	3.79	4.53	1.50	1.93	0.12	5.45	6.19	3.16	3.59	010
42804		A	Biopsy of upper nose/throat	1.24	3.29	3.64	1.35	1.64	0.10	4.63	4.98	2.69	2.98	010
42806		A	Biopsy of upper nose/throat	1.58	3.51	3.94	1.45	1.82	0.13	5.22	5.65	3.16	3.53	010
42808		A	Excise pharynx lesion	2.30	2.93	3.06	1.42	1.81	0.19	5.42	5.55	3.91	4.30	010
42809		A	Remove pharynx foreign body	1.81	2.10	2.28	1.23	1.31	0.16	4.07	4.25	3.20	3.28	010
42810		A	Excision of neck cyst	3.25	5.67	5.72	3.36	3.50	0.29	9.21	9.26	6.90	7.04	090
42815		A	Excision of neck cyst	7.18	NA	NA	5.62	6.23	0.61	NA	NA	13.41	14.02	090
42820		A	Remove tonsils and adenoids	4.15	NA	NA	2.48	3.10	0.31	NA	NA	6.94	7.56	090
42821		A	Remove tonsils and adenoids	4.28	NA	NA	2.63	3.29	0.35	NA	NA	7.26	7.92	090
42825		A	Removal of tonsils	3.41	NA	NA	2.38	2.98	0.25	NA	NA	6.04	6.64	090
42826		A	Removal of tonsils	3.37	NA	NA	2.38	2.88	0.27	NA	NA	6.02	6.52	090
42830		A	Removal of adenoids	2.57	NA	NA	2.16	2.47	0.20	NA	NA	4.93	5.24	090
42831		A	Removal of adenoids	2.71	NA	NA	2.37	2.73	0.22	NA	NA	5.30	5.66	090
42835		A	Removal of adenoids	2.30	NA	NA	1.76	2.29	0.21	NA	NA	4.27	4.80	090
42836		A	Removal of adenoids	3.18	NA	NA	2.37	2.82	0.26	NA	NA	5.81	6.26	090
42842		A	Extensive surgery of throat	11.94	NA	NA	10.34	10.85	0.71	NA	NA	22.99	23.50	090
42844		A	Extensive surgery of throat	17.49	NA	NA	14.26	15.78	1.16	NA	NA	32.91	34.43	090
42845		A	Extensive surgery of throat	32.27	NA	NA	20.22	22.49	1.98	NA	NA	54.47	56.74	090
42860		A	Excision of tonsil tags	2.22	NA	NA	2.07	2.33	0.18	NA	NA	4.47	4.73	090
42870		A	Excision of lingual tonsil	5.39	NA	NA	7.88	8.41	0.44	NA	NA	13.71	14.24	090
42890		A	Partial removal of pharynx	18.84	NA	NA	13.48	14.01	1.05	NA	NA	33.37	33.90	090
42892		A	Revision of pharyngeal walls	25.67	NA	NA	16.85	17.13	1.28	NA	NA	43.80	44.08	090
42894		A	Revision of pharyngeal walls	33.49	NA	NA	20.21	21.61	1.86	NA	NA	55.56	56.96	090
42900		A	Repair throat wound	5.24	NA	NA	2.66	3.42	0.50	NA	NA	8.40	9.16	010
42950		A	Reconstruction of throat	8.09	NA	NA	10.08	11.45	0.72	NA	NA	18.89	20.26	090
42953		A	Repair throat, esophagus	9.25	NA	NA	12.70	16.21	0.88	NA	NA	22.83	26.34	090
42955		A	Surgical opening of throat	7.86	NA	NA	9.33	10.36	0.80	NA	NA	17.99	19.02	090
42960		A	Control throat bleeding	2.33	NA	NA	1.57	1.87	0.19	NA	NA	4.09	4.39	010
42961		A	Control throat bleeding	5.64	NA	NA	4.03	4.74	0.45	NA	NA	10.12	10.83	090
42962		A	Control throat bleeding	7.25	NA	NA	4.61	5.60	0.58	NA	NA	12.44	13.43	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
42970		A	Control nose/throat bleeding	5.72	NA	NA	3.44	4.00	0.39	NA	NA	9.55	10.11	090
42971		A	Control nose/throat bleeding	6.50	NA	NA	4.01	4.85	0.51	NA	NA	11.02	11.86	090
42972		A	Control nose/throat bleeding	7.49	NA	NA	4.35	5.38	0.62	NA	NA	12.46	13.49	090
43020		A	Incision of esophagus	8.08	NA	NA	4.29	5.15	0.87	NA	NA	13.24	14.10	090
43030		A	Throat muscle surgery	7.86	NA	NA	4.07	5.15	0.70	NA	NA	12.63	13.71	090
43045		A	Incision of esophagus	21.62	NA	NA	10.14	10.58	2.58	NA	NA	34.34	34.78	090
43100		A	Excision of esophagus lesion	9.48	NA	NA	4.97	5.92	0.93	NA	NA	15.38	16.33	090
43101		A	Excision of esophagus lesion	16.94	NA	NA	7.23	7.73	2.31	NA	NA	26.48	26.98	090
43107		A	Removal of esophagus	43.89	NA	NA	16.66	17.90	5.22	NA	NA	65.77	67.01	090
43108		A	Removal of esophagus	63.23	NA	NA	19.92	15.67	4.07	NA	NA	87.22	82.97	090
43112		A	Removal of esophagus	47.21	NA	NA	17.22	18.87	5.79	NA	NA	70.22	71.87	090
43113		A	Removal of esophagus	46.95	NA	NA	17.97	15.86	4.42	NA	NA	69.34	67.23	090
43116		A	Partial removal of esophagus	71.39	NA	NA	21.91	18.03	3.05	NA	NA	96.35	92.47	090
43117		A	Partial removal of esophagus	43.46	NA	NA	15.41	16.84	5.17	NA	NA	64.04	65.47	090
43118		A	Partial removal of esophagus	52.07	NA	NA	16.85	14.58	4.10	NA	NA	73.02	70.75	090
43121		A	Partial removal of esophagus	46.35	NA	NA	16.28	14.35	3.90	NA	NA	66.53	64.60	090
43122		A	Partial removal of esophagus	43.89	NA	NA	15.66	17.00	5.40	NA	NA	64.95	66.29	090
43123		A	Partial removal of esophagus	63.83	NA	NA	20.07	15.62	4.15	NA	NA	88.05	83.60	090
43124		A	Removal of esophagus	64.63	NA	NA	21.43	15.20	3.73	NA	NA	89.79	83.56	090
43130		A	Removal of esophagus pouch	12.33	NA	NA	5.82	7.14	1.16	NA	NA	19.31	20.63	090
43135		A	Removal of esophagus pouch	22.37	NA	NA	9.07	8.35	2.33	NA	NA	33.77	33.05	090
43200		A	Esophagus endoscopy	1.59	3.55	3.99	0.91	1.03	0.13	5.27	5.71	2.63	2.75	000
43201		A	Esoph scope w/submucous inj	2.09	5.69	4.90	1.21	1.13	0.15	7.93	7.14	3.45	3.37	000
43202		A	Esophagus endoscopy, biopsy	1.89	5.22	5.48	0.99	0.95	0.15	7.26	7.52	3.03	2.99	000
43204		A	Esoph scope w/sclerosis inj	3.76	NA	NA	2.01	1.64	0.30	NA	NA	6.07	5.70	000
43205		A	Esophagus endoscopy/ligation	3.78	NA	NA	2.12	1.67	0.28	NA	NA	6.18	5.73	000
43215		A	Esophagus endoscopy	2.60	NA	NA	1.29	1.22	0.22	NA	NA	4.11	4.04	000
43216		A	Esophagus endoscopy/lesion	2.40	NA	NA	1.24	1.11	0.20	NA	NA	3.84	3.71	000
43217		A	Esophagus endoscopy	2.90	6.72	6.91	1.43	1.25	0.26	9.88	10.07	4.59	4.41	000
43219		A	Esophagus endoscopy	2.80	NA	NA	1.58	1.41	0.24	NA	NA	4.62	4.45	000
43220		A	Esoph endoscopy, dilation	2.10	NA	NA	1.15	1.02	0.17	NA	NA	3.42	3.29	000
43226		A	Esoph endoscopy, dilation	2.34	NA	NA	1.32	1.10	0.19	NA	NA	3.85	3.63	000
43227		A	Esoph endoscopy, repair	3.59	NA	NA	1.88	1.56	0.28	NA	NA	5.75	5.43	000
43228		A	Esoph endoscopy, ablation	3.76	NA	NA	1.90	1.64	0.34	NA	NA	6.00	5.74	000
43231		A	Esoph endoscopy w/us exam	3.19	NA	NA	1.79	1.43	0.23	NA	NA	5.21	4.85	000
43232		A	Esoph endoscopy w/us fn bx	4.47	NA	NA	2.44	1.98	0.34	NA	NA	7.25	6.79	000
43234		A	Upper GI endoscopy, exam	2.01	5.07	5.27	1.03	0.91	0.17	7.25	7.45	3.21	3.09	000
43235		A	Uppr gi endoscopy, diagnosis	2.39	5.42	5.24	1.40	1.12	0.19	8.00	7.82	3.98	3.70	000
43236		A	Uppr gi scope w/submuc inj	2.92	6.90	6.54	1.71	1.34	0.21	10.03	9.67	4.84	4.47	000
43237		A	Endoscopic us exam, esoph	3.98	NA	NA	2.23	1.75	0.43	NA	NA	6.64	6.16	000
43238		A	Uppr gi endoscopy w/us fn bx	5.02	NA	NA	2.63	2.14	0.43	NA	NA	8.08	7.59	000
43239		A	Upper GI endoscopy, biopsy	2.87	6.20	5.85	1.61	1.30	0.22	9.29	8.94	4.70	4.39	000
43240		A	Esoph endoscope w/drain cyst	6.85	NA	NA	3.58	2.85	0.56	NA	NA	10.99	10.26	000
43241		A	Upper GI endoscopy with tube	2.59	NA	NA	1.46	1.19	0.21	NA	NA	4.26	3.99	000
43242		A	Uppr gi endoscopy w/us fn bx	7.30	NA	NA	3.81	3.01	0.53	NA	NA	11.64	10.84	000
43243		A	Upper gi endoscopy & inject	4.56	NA	NA	2.45	1.96	0.33	NA	NA	7.34	6.85	000
43244		A	Upper GI endoscopy/ligation	5.04	NA	NA	2.74	2.16	0.37	NA	NA	8.15	7.57	000
43245		A	Uppr gi scope dilate strictr	3.18	NA	NA	1.68	1.40	0.26	NA	NA	5.12	4.84	000
43246		A	Place gastrostomy tube	4.32	NA	NA	2.18	1.81	0.34	NA	NA	6.84	6.47	000
43247		A	Operative upper GI endoscopy	3.38	NA	NA	1.84	1.49	0.27	NA	NA	5.49	5.14	000
43248		A	Uppr gi endoscopy/guide wire	3.15	NA	NA	1.85	1.45	0.23	NA	NA	5.23	4.83	000
43249		A	Esoph endoscopy, dilation	2.90	NA	NA	1.68	1.33	0.22	NA	NA	4.80	4.45	000

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
43250		A	Upper GI endoscopy/tumor	3.20	NA	NA	1.68	1.40	0.26	NA	NA	5.14	4.86	000
43251		A	Operative upper GI endoscopy	3.69	NA	NA	1.99	1.61	0.29	NA	NA	5.97	5.59	000
43255		A	Operative upper GI endoscopy	4.81	NA	NA	2.62	2.07	0.35	NA	NA	7.78	7.23	000
43256		A	Uppr gi endoscopy w/stent	4.34	NA	NA	2.33	1.87	0.32	NA	NA	6.99	6.53	000
43257		A	Uppr gi scope w/thrml txmnt	5.50	NA	NA	2.07	2.18	0.36	NA	NA	7.93	8.04	000
43258		A	Operative upper GI endoscopy	4.54	NA	NA	2.47	1.96	0.33	NA	NA	7.34	6.83	000
43259		A	Endoscopic ultrasound exam	5.19	NA	NA	2.78	2.20	0.35	NA	NA	8.32	7.74	000
43260		A	Endo cholangiopancreatograph	5.95	NA	NA	3.18	2.51	0.43	NA	NA	9.56	8.89	000
43261		A	Endo cholangiopancreatograph	6.26	NA	NA	3.34	2.64	0.46	NA	NA	10.06	9.36	000
43262		A	Endo cholangiopancreatograph	7.38	NA	NA	3.87	3.06	0.54	NA	NA	11.79	10.98	000
43263		A	Endo cholangiopancreatograph	7.28	NA	NA	3.88	3.05	0.54	NA	NA	11.70	10.87	000
43264		A	Endo cholangiopancreatograph	8.89	NA	NA	4.62	3.65	0.65	NA	NA	14.16	13.19	000
43265		A	Endo cholangiopancreatograph	10.00	NA	NA	5.14	4.06	0.73	NA	NA	15.87	14.79	000
43267		A	Endo cholangiopancreatograph	7.38	NA	NA	3.77	3.04	0.54	NA	NA	11.69	10.96	000
43268		A	Endo cholangiopancreatograph	7.38	NA	NA	4.04	3.18	0.54	NA	NA	11.96	11.10	000
43269		A	Endo cholangiopancreatograph	8.20	NA	NA	4.27	3.38	0.60	NA	NA	13.07	12.18	000
43271		A	Endo cholangiopancreatograph	7.38	NA	NA	3.88	3.06	0.54	NA	NA	11.80	10.98	000
43272		A	Endo cholangiopancreatograph	7.38	NA	NA	3.96	3.08	0.54	NA	NA	11.88	11.00	000
43280		A	Laparoscopy, fundoplasty	17.96	NA	NA	6.64	7.13	2.27	NA	NA	26.87	27.36	090
43300		A	Repair of esophagus	9.13	NA	NA	5.13	6.08	1.12	NA	NA	15.38	16.33	090
43305		A	Repair esophagus and fistula	17.90	NA	NA	7.32	9.87	1.54	NA	NA	26.76	29.31	090
43310		A	Repair of esophagus	26.13	NA	NA	10.16	10.86	3.60	NA	NA	39.89	40.59	090
43312		A	Repair esophagus and fistula	29.22	NA	NA	10.01	11.44	4.00	NA	NA	43.23	44.66	090
43313		A	Esophagoplasty congenital	48.07	NA	NA	17.09	18.42	5.45	NA	NA	70.61	71.94	090
43314		A	Tracheo-esophagoplasty cong	53.05	NA	NA	18.47	19.05	6.63	NA	NA	78.15	78.73	090
43320		A	Fuse esophagus & stomach	23.12	NA	NA	8.80	9.12	2.73	NA	NA	34.65	34.97	090
43324		A	Revise esophagus & stomach	22.80	NA	NA	8.30	8.67	2.75	NA	NA	33.85	34.22	090
43325		A	Revise esophagus & stomach	22.41	NA	NA	8.35	8.70	2.59	NA	NA	33.35	33.70	090
43326		A	Revise esophagus & stomach	22.09	NA	NA	9.37	9.33	2.84	NA	NA	34.30	34.26	090
43330		A	Repair of esophagus	22.00	NA	NA	8.13	8.45	2.62	NA	NA	32.75	33.07	090
43331		A	Repair of esophagus	22.87	NA	NA	9.61	9.76	2.93	NA	NA	35.41	35.56	090
43340		A	Fuse esophagus & intestine	22.80	NA	NA	9.05	9.01	2.45	NA	NA	34.30	34.26	090
43341		A	Fuse esophagus & intestine	24.04	NA	NA	10.24	10.09	2.91	NA	NA	37.19	37.04	090
43350		A	Surgical opening, esophagus	19.23	NA	NA	7.98	8.34	1.42	NA	NA	28.63	28.99	090
43351		A	Surgical opening, esophagus	21.79	NA	NA	9.61	9.77	2.46	NA	NA	33.86	34.02	090
43352		A	Surgical opening, esophagus	17.62	NA	NA	8.17	8.34	2.05	NA	NA	27.84	28.01	090
43360		A	Gastrointestinal repair	39.82	NA	NA	15.84	15.29	4.96	NA	NA	60.62	60.07	090
43361		A	Gastrointestinal repair	45.42	NA	NA	16.90	16.92	4.49	NA	NA	66.81	66.83	090
43400		A	Ligate esophagus veins	25.41	NA	NA	13.84	10.56	1.95	NA	NA	41.20	37.92	090
43401		A	Esophagus surgery for veins	26.30	NA	NA	9.37	9.48	3.04	NA	NA	38.71	38.82	090
43405		A	Ligate/staple esophagus	24.47	NA	NA	10.39	9.81	2.83	NA	NA	37.69	37.11	090
43410		A	Repair esophagus wound	16.22	NA	NA	7.48	7.61	1.71	NA	NA	25.41	25.54	090
43415		A	Repair esophagus wound	28.62	NA	NA	11.95	11.82	3.52	NA	NA	44.09	43.96	090
43420		A	Repair esophagus opening	16.59	NA	NA	6.72	7.25	1.43	NA	NA	24.74	25.27	090
43425		A	Repair esophagus opening	24.85	NA	NA	10.23	10.06	3.02	NA	NA	38.10	37.93	090
43450		A	Dilate esophagus	1.38	2.75	2.67	0.96	0.76	0.11	4.24	4.16	2.45	2.25	000
43453		A	Dilate esophagus	1.51	6.50	6.19	1.05	0.81	0.11	8.12	7.81	2.67	2.43	000
43456		A	Dilate esophagus	2.57	13.40	13.69	1.51	1.20	0.20	16.17	16.46	4.28	3.97	000
43458		A	Dilate esophagus	3.06	7.13	6.79	1.67	1.38	0.24	10.43	10.09	4.97	4.68	000
43460		A	Pressure treatment esophagus	3.79	NA	NA	1.77	1.56	0.31	NA	NA	5.87	5.66	000
43500		A	Surgical opening of stomach	12.67	NA	NA	5.22	5.04	1.45	NA	NA	19.34	19.16	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
43501		A	Surgical repair of stomach	22.41	NA	NA	8.06	8.26	2.64	NA	NA	33.11	33.31	090
43502		A	Surgical repair of stomach	25.50	NA	NA	8.95	9.35	3.09	NA	NA	37.54	37.94	090
43510		A	Surgical opening of stomach	14.95	NA	NA	6.81	6.65	1.48	NA	NA	23.24	23.08	090
43520		A	Incision of pyloric muscle	11.17	NA	NA	4.88	5.17	1.36	NA	NA	17.41	17.70	090
43600		A	Biopsy of stomach	1.91	NA	NA	0.83	0.70	0.14	NA	NA	2.88	2.75	000
43605		A	Biopsy of stomach	13.60	NA	NA	5.39	5.32	1.58	NA	NA	20.57	20.50	090
43610		A	Excision of stomach lesion	16.22	NA	NA	6.02	6.13	1.93	NA	NA	24.17	24.28	090
43611		A	Excision of stomach lesion	20.19	NA	NA	7.49	7.56	2.35	NA	NA	30.03	30.10	090
43620		A	Removal of stomach	33.85	NA	NA	11.02	11.62	3.95	NA	NA	48.82	49.42	090
43621		A	Removal of stomach	39.34	NA	NA	12.36	12.09	4.03	NA	NA	55.73	55.46	090
43622		A	Removal of stomach	39.84	NA	NA	12.48	12.59	4.29	NA	NA	56.61	56.72	090
43631		A	Removal of stomach, partial	24.32	NA	NA	8.55	9.02	2.98	NA	NA	35.85	36.32	090
43632		A	Removal of stomach, partial	34.95	NA	NA	11.24	9.70	2.98	NA	NA	49.17	47.63	090
43633		A	Removal of stomach, partial	32.95	NA	NA	10.74	9.70	3.05	NA	NA	46.74	45.70	090
43634		A	Removal of stomach, partial	36.45	NA	NA	11.69	10.51	3.32	NA	NA	51.46	50.28	090
43635		A	Removal of stomach, partial	2.06	NA	NA	0.52	0.66	0.27	NA	NA	2.85	2.99	ZZZ
43640		A	Vagotomy & pylorus repair	19.37	NA	NA	7.27	7.27	2.25	NA	NA	28.89	28.89	090
43641		A	Vagotomy & pylorus repair	19.62	NA	NA	7.30	7.36	2.24	NA	NA	29.16	29.22	090
43644		A	Lap gastric bypass/roux-en-y	29.18	NA	NA	10.13	10.96	3.15	NA	NA	42.46	43.29	090
43645		A	Lap gastr bypass incl smll i	31.31	NA	NA	11.28	11.85	3.53	NA	NA	46.12	46.69	090
43651		A	Laparoscopy, vagus nerve	10.13	NA	NA	4.59	4.73	1.33	NA	NA	16.05	16.19	090
43652		A	Laparoscopy, vagus nerve	12.13	NA	NA	5.10	5.60	1.55	NA	NA	18.78	19.28	090
43653		A	Laparoscopy, gastrostomy	8.34	NA	NA	4.34	4.23	1.01	NA	NA	13.69	13.58	090
43750		A	Place gastrostomy tube	4.60	NA	NA	1.77	2.09	0.43	NA	NA	6.80	7.12	010
43752		A	Nasal/orogastric w/stent	0.81	0.26	0.28	0.26	0.26	0.02	1.09	1.11	1.09	1.09	000
43760		A	Change gastrostomy tube	1.10	13.41	4.92	0.40	0.44	0.09	14.60	6.11	1.59	1.63	000
43761		A	Reposition gastrostomy tube	2.01	1.05	1.14	0.69	0.67	0.13	3.19	3.28	2.83	2.81	000
43770		A	Lap, place gastr adjust band	17.79	NA	NA	7.53	7.68	2.18	NA	NA	27.50	27.65	090
43771		A	Lap, revise adjust gast band	20.58	NA	NA	8.10	8.48	2.54	NA	NA	31.22	31.60	090
43772		A	Lap, remove adjust gast band	15.58	NA	NA	5.94	6.32	1.92	NA	NA	23.44	23.82	090
43773		A	Lap, change adjust gast band	20.58	NA	NA	8.10	8.48	2.55	NA	NA	31.23	31.61	090
43774		A	Lap remov adj gast band/port	15.62	NA	NA	6.19	6.48	1.84	NA	NA	23.65	23.94	090
43800		A	Reconstruction of pylorus	15.31	NA	NA	5.79	5.88	1.81	NA	NA	22.91	23.00	090
43810		A	Fusion of stomach and bowel	16.76	NA	NA	6.13	6.18	1.93	NA	NA	24.82	24.87	090
43820		A	Fusion of stomach and bowel	22.34	NA	NA	7.54	6.70	2.03	NA	NA	31.91	31.07	090
43825		A	Fusion of stomach and bowel	21.57	NA	NA	7.82	7.98	2.53	NA	NA	31.92	32.08	090
43830		A	Place gastrostomy tube	10.71	NA	NA	5.13	4.92	1.25	NA	NA	17.09	16.88	090
43831		A	Place gastrostomy tube	8.31	NA	NA	5.11	4.67	1.03	NA	NA	14.45	14.01	090
43832		A	Place gastrostomy tube	17.22	NA	NA	7.09	6.92	1.97	NA	NA	26.28	26.11	090
43840		A	Repair of stomach lesion	22.64	NA	NA	8.10	7.11	2.05	NA	NA	32.79	31.80	090
43842		N	V-band gastroplasty	20.84	NA	NA	7.63	7.77	2.44	NA	NA	30.91	31.05	090
43843		A	Gastroplasty w/o v-band	21.02	NA	NA	7.76	7.78	2.45	NA	NA	31.23	31.25	090
43845		A	Gastroplasty duodenal switch	33.04	9.83	10.56	12.86	11.32	4.05	46.92	47.65	49.95	48.41	090
43846		A	Gastric bypass for obesity	27.15	NA	NA	9.90	10.01	3.18	NA	NA	40.23	40.34	090
43847		A	Gastric bypass incl small i	30.02	NA	NA	10.55	10.83	3.55	NA	NA	44.12	44.40	090
43848		A	Revision gastroplasty	32.49	NA	NA	11.17	11.67	3.87	NA	NA	47.53	48.03	090
43850		A	Revise stomach-bowel fusion	27.39	NA	NA	9.28	9.70	3.27	NA	NA	39.94	40.36	090
43855		A	Revise stomach-bowel fusion	28.50	NA	NA	9.61	10.17	3.46	NA	NA	41.57	42.13	090
43860		A	Revise stomach-bowel fusion	27.70	NA	NA	9.38	9.84	3.30	NA	NA	40.38	40.84	090
43865		A	Revise stomach-bowel fusion	28.86	NA	NA	9.93	10.38	3.50	NA	NA	42.29	42.74	090
43870		A	Repair stomach opening	11.32	NA	NA	4.97	4.63	1.27	NA	NA	17.56	17.22	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
43880		A	Repair stomach-bowel fistula	26.99	NA	NA	9.22	9.75	3.26	NA	NA	39.47	40.00	090
43886		A	Revise gastric port, open	4.50	NA	NA	3.47	3.22	0.25	NA	NA	8.22	7.97	090
43887		A	Remove gastric port, open	4.20	NA	NA	3.02	2.84	0.51	NA	NA	7.73	7.55	090
43888		A	Change gastric port, open	6.30	NA	NA	3.96	3.82	0.70	NA	NA	10.96	10.82	090
44005		A	Freeing of bowel adhesion	18.34	NA	NA	6.53	6.68	2.14	NA	NA	27.01	27.16	090
44010		A	Incision of small bowel	14.14	NA	NA	5.47	5.46	1.64	NA	NA	21.25	21.24	090
44015		A	Insert needle cath bowel	2.62	NA	NA	0.68	0.83	0.35	NA	NA	3.65	3.80	ZZZ
44020		A	Explore small intestine	16.10	NA	NA	5.93	5.95	1.85	NA	NA	23.88	23.90	090
44021		A	Decompress small bowel	16.19	NA	NA	6.23	6.04	1.86	NA	NA	24.28	24.09	090
44025		A	Incision of large bowel	16.39	NA	NA	6.06	6.05	1.89	NA	NA	24.34	24.33	090
44050		A	Reduce bowel obstruction	15.40	NA	NA	5.76	5.92	1.85	NA	NA	23.01	23.17	090
44055		A	Correct malrotation of bowel	25.49	NA	NA	8.43	8.67	2.90	NA	NA	36.82	37.06	090
44100		A	Biopsy of bowel	2.01	NA	NA	0.92	0.76	0.17	NA	NA	3.10	2.94	000
44110		A	Excise intestine lesion(s)	13.92	NA	NA	5.47	5.30	1.55	NA	NA	20.94	20.77	090
44111		A	Excision of bowel lesion(s)	16.40	NA	NA	6.07	6.11	1.86	NA	NA	24.33	24.37	090
44120		A	Removal of small intestine	20.70	NA	NA	7.25	7.13	2.24	NA	NA	30.19	30.07	090
44121		A	Removal of small intestine	4.44	NA	NA	1.12	1.42	0.58	NA	NA	6.14	6.44	ZZZ
44125		A	Removal of small intestine	19.89	NA	NA	7.00	7.20	2.26	NA	NA	29.15	29.35	090
44126		A	Enterectomy w/o taper, cong	41.94	NA	NA	13.72	14.04	4.68	NA	NA	60.34	60.66	090
44127		A	Enterectomy w/taper, cong	49.01	NA	NA	14.56	15.46	5.75	NA	NA	69.32	70.22	090
44128		A	Enterectomy cong, add-on	4.44	NA	NA	1.04	1.41	0.61	NA	NA	6.09	6.46	ZZZ
44130		A	Bowel to bowel fusion	21.92	NA	NA	7.56	6.56	1.87	NA	NA	31.35	30.35	090
44139		A	Mobilization of colon	2.23	NA	NA	0.55	0.71	0.28	NA	NA	3.06	3.22	ZZZ
44140		A	Partial removal of colon	22.40	NA	NA	8.06	8.52	2.70	NA	NA	33.16	33.62	090
44141		A	Partial removal of colon	29.69	NA	NA	12.06	10.57	2.52	NA	NA	44.27	42.78	090
44143		A	Partial removal of colon	27.57	NA	NA	10.85	10.75	3.04	NA	NA	41.46	41.36	090
44144		A	Partial removal of colon	29.69	NA	NA	10.91	9.96	2.85	NA	NA	43.45	42.50	090
44145		A	Partial removal of colon	28.39	NA	NA	10.06	10.64	3.28	NA	NA	41.73	42.31	090
44146		A	Partial removal of colon	35.08	NA	NA	13.52	13.05	3.40	NA	NA	52.00	51.53	090
44147		A	Partial removal of colon	33.50	NA	NA	11.29	9.36	2.55	NA	NA	47.34	45.41	090
44150		A	Removal of colon	29.91	NA	NA	12.96	12.28	3.03	NA	NA	45.90	45.22	090
44151		A	Removal of colon/ileostomy	34.65	NA	NA	14.61	13.73	3.48	NA	NA	52.74	51.86	090
44152		A	Removal of colon/ileostomy	29.91	NA	NA	10.38	11.31	3.51	NA	NA	43.80	44.73	090
44153		A	Removal of colon/ileostomy	33.17	NA	NA	14.25	14.37	3.54	NA	NA	50.96	51.08	090
44155		A	Removal of colon/ileostomy	34.15	NA	NA	14.02	13.51	3.27	NA	NA	51.44	50.93	090
44156		A	Removal of colon/ileostomy	37.15	NA	NA	15.47	15.17	3.94	NA	NA	56.56	56.26	090
44160		A	Removal of colon	20.72	NA	NA	7.49	7.69	2.36	NA	NA	30.57	30.77	090
44180		A	Lap, enterolysis	15.15	NA	NA	5.79	6.14	1.85	NA	NA	22.79	23.14	090
44186		A	Lap, jejunostomy	10.26	NA	NA	4.58	4.75	1.27	NA	NA	16.11	16.28	090
44187		A	Lap, ileo/jejuno-stomy	17.21	NA	NA	8.15	8.26	1.95	NA	NA	27.31	27.42	090
44188		A	Lap, colostomy	19.14	NA	NA	8.72	8.83	2.23	NA	NA	30.09	30.20	090
44202		A	Lap, enterectomy	23.20	NA	NA	8.28	8.78	2.84	NA	NA	34.32	34.82	090
44203		A	Lap resect s/intestine, addl	4.44	NA	NA	1.12	1.41	0.57	NA	NA	6.13	6.42	ZZZ
44204		A	Laparo partial colectomy	26.23	NA	NA	8.86	9.70	3.10	NA	NA	38.19	39.03	090
44205		A	Lap colectomy part w/ileum	22.80	NA	NA	7.77	8.60	2.74	NA	NA	33.31	34.14	090
44206		A	Lap part colectomy w/stoma	29.57	NA	NA	10.45	11.07	3.45	NA	NA	43.47	44.09	090
44207		A	L colectomy/coloproctostomy	31.73	NA	NA	10.06	11.15	3.66	NA	NA	45.45	46.54	090
44208		A	L colectomy/coloproctostomy	33.80	NA	NA	11.98	12.87	3.87	NA	NA	49.65	50.54	090
44210		A	Laparo total proctocolectomy	29.80	NA	NA	11.12	11.71	3.41	NA	NA	44.33	44.92	090
44211		A	Laparo total proctocolectomy	36.79	NA	NA	13.67	14.45	4.16	NA	NA	54.62	55.40	090
44212		A	Laparo total proctocolectomy	34.29	NA	NA	13.17	13.58	3.77	NA	NA	51.23	51.64	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
44213		A	Lap, mobil splenic fl add-on	3.50	NA	NA	0.87	1.13	0.44	NA	NA	4.81	5.07	ZZZ
44227		A	Lap, close enterostomy	28.43	NA	NA	9.45	10.35	3.37	NA	NA	41.25	42.15	090
44300		A	Open bowel to skin	13.61	NA	NA	5.58	5.52	1.60	NA	NA	20.79	20.73	090
44310		A	Ileostomy/jejunostomy	17.45	NA	NA	6.37	6.63	1.98	NA	NA	25.80	26.06	090
44312		A	Revision of ileostomy	9.29	NA	NA	4.64	4.16	0.92	NA	NA	14.85	14.37	090
44314		A	Revision of ileostomy	16.55	NA	NA	6.84	6.64	1.74	NA	NA	25.13	24.93	090
44316		A	Devise bowel pouch	23.40	NA	NA	9.33	8.75	2.37	NA	NA	35.10	34.52	090
44320		A	Colostomy	19.69	NA	NA	7.58	7.65	2.25	NA	NA	29.52	29.59	090
44322		A	Colostomy with biopsies	13.04	NA	NA	9.43	8.80	1.54	NA	NA	24.01	23.38	090
44340		A	Revision of colostomy	9.06	NA	NA	4.94	4.44	0.99	NA	NA	14.99	14.49	090
44345		A	Revision of colostomy	17.00	NA	NA	6.89	6.90	1.96	NA	NA	25.85	25.86	090
44346		A	Revision of colostomy	19.41	NA	NA	7.51	7.43	2.12	NA	NA	29.04	28.96	090
44360		A	Small bowel endoscopy	2.59	NA	NA	1.56	1.22	0.19	NA	NA	4.34	4.00	000
44361		A	Small bowel endoscopy/biopsy	2.87	NA	NA	1.71	1.33	0.21	NA	NA	4.79	4.41	000
44363		A	Small bowel endoscopy	3.49	NA	NA	2.02	1.54	0.27	NA	NA	5.78	5.30	000
44364		A	Small bowel endoscopy	3.73	NA	NA	2.10	1.64	0.27	NA	NA	6.10	5.64	000
44365		A	Small bowel endoscopy	3.31	NA	NA	1.85	1.48	0.24	NA	NA	5.40	5.03	000
44366		A	Small bowel endoscopy	4.40	NA	NA	2.48	1.93	0.32	NA	NA	7.20	6.65	000
44369		A	Small bowel endoscopy	4.51	NA	NA	2.51	1.93	0.33	NA	NA	7.35	6.77	000
44370		A	Small bowel endoscopy/stent	4.79	NA	NA	2.66	2.15	0.37	NA	NA	7.82	7.31	000
44372		A	Small bowel endoscopy	4.40	NA	NA	2.20	1.86	0.35	NA	NA	6.95	6.61	000
44373		A	Small bowel endoscopy	3.49	NA	NA	1.82	1.52	0.27	NA	NA	5.58	5.28	000
44376		A	Small bowel endoscopy	5.25	NA	NA	2.53	2.16	0.42	NA	NA	8.20	7.83	000
44377		A	Small bowel endoscopy/biopsy	5.52	NA	NA	2.90	2.33	0.40	NA	NA	8.82	8.25	000
44378		A	Small bowel endoscopy	7.12	NA	NA	3.69	2.95	0.52	NA	NA	11.33	10.59	000
44379		A	S bowel endoscope w/stent	7.46	NA	NA	3.38	3.04	0.62	NA	NA	11.46	11.12	000
44380		A	Small bowel endoscopy	1.05	NA	NA	0.77	0.61	0.08	NA	NA	1.90	1.74	000
44382		A	Small bowel endoscopy	1.27	NA	NA	0.81	0.68	0.12	NA	NA	2.20	2.07	000
44383		A	Ileoscopy w/stent	2.94	NA	NA	1.68	1.37	0.21	NA	NA	4.83	4.52	000
44385		A	Endoscopy of bowel pouch	1.82	4.99	3.77	0.90	0.79	0.15	6.96	5.74	2.87	2.76	000
44386		A	Endoscopy, bowel pouch/biop	2.12	6.90	6.72	1.07	0.93	0.20	9.22	9.04	3.39	3.25	000
44388		A	Colonoscopy	2.82	6.25	5.38	1.38	1.21	0.26	9.33	8.46	4.46	4.29	000
44389		A	Colonoscopy with biopsy	3.13	7.27	6.80	1.62	1.36	0.27	10.67	10.20	5.02	4.76	000
44390		A	Colonoscopy for foreign body	3.82	8.17	7.39	1.84	1.58	0.32	12.31	11.53	5.98	5.72	000
44391		A	Colonoscopy for bleeding	4.31	9.24	8.87	2.29	1.84	0.34	13.89	13.52	6.94	6.49	000
44392		A	Colonoscopy & polypectomy	3.81	7.52	6.83	1.74	1.55	0.34	11.67	10.98	5.89	5.70	000
44393		A	Colonoscopy, lesion removal	4.83	8.05	7.20	2.09	1.93	0.42	13.30	12.45	7.34	7.18	000
44394		A	Colonoscopy w/snare	4.42	8.70	8.05	2.12	1.82	0.38	13.50	12.85	6.92	6.62	000
44397		A	Colonoscopy w/stent	4.70	NA	NA	2.37	1.94	0.39	NA	NA	7.46	7.03	000
44500		A	Intro, gastrointestinal tube	0.49	NA	NA	0.17	0.16	0.03	NA	NA	0.69	0.68	000
44602		A	Suture, small intestine	24.60	NA	NA	7.61	6.71	2.11	NA	NA	34.32	33.42	090
44603		A	Suture, small intestine	27.97	NA	NA	8.46	7.58	2.41	NA	NA	38.84	37.96	090
44604		A	Suture, large intestine	18.02	NA	NA	6.05	6.37	2.11	NA	NA	26.18	26.50	090
44605		A	Repair of bowel lesion	21.96	NA	NA	7.86	8.27	2.51	NA	NA	32.33	32.74	090
44615		A	Intestinal stricturoplasty	18.04	NA	NA	6.54	6.65	2.06	NA	NA	26.64	26.75	090
44620		A	Repair bowel opening	14.31	NA	NA	5.48	5.38	1.51	NA	NA	21.30	21.20	090
44625		A	Repair bowel opening	17.16	NA	NA	6.14	6.28	1.85	NA	NA	25.15	25.29	090
44626		A	Repair bowel opening	27.78	NA	NA	8.89	9.60	3.26	NA	NA	39.93	40.64	090
44640		A	Repair bowel-skin fistula	24.08	NA	NA	8.03	8.45	2.77	NA	NA	34.88	35.30	090
44650		A	Repair bowel fistula	25.00	NA	NA	8.27	8.75	2.92	NA	NA	36.19	36.67	090
44660		A	Repair bowel-bladder fistula	23.79	NA	NA	9.84	8.73	2.13	NA	NA	35.76	34.65	090
44661		A	Repair bowel-bladder fistula	27.23	NA	NA	9.42	9.54	2.80	NA	NA	39.45	39.57	090

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CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
44680		A	Surgical revision, intestine	17.84	NA	NA	6.56	6.49	1.99	NA	NA	26.39	26.32	090
44700		A	Suspend bowel w/prosthesis	17.36	NA	NA	6.18	6.56	1.83	NA	NA	25.37	25.75	090
44701		A	Intraop colon lavage add-on	3.10	NA	NA	0.76	0.99	0.37	NA	NA	4.23	4.46	ZZZ
44720		A	Prep donor intestine/venous	5.00	NA	NA	1.22	1.59	0.37	NA	NA	6.59	6.96	XXX
44721		A	Prep donor intestine/artery	7.00	NA	NA	1.77	2.24	0.97	NA	NA	9.74	10.21	XXX
44800		A	Excision of bowel pouch	11.87	NA	NA	5.51	5.43	1.47	NA	NA	18.85	18.77	090
44820		A	Excision of mesentery lesion	13.59	NA	NA	5.59	5.52	1.59	NA	NA	20.77	20.70	090
44850		A	Repair of mesentery	11.99	NA	NA	4.99	5.01	1.39	NA	NA	18.37	18.39	090
44900		A	Drain app abscess, open	12.38	NA	NA	5.02	4.78	1.33	NA	NA	18.73	18.49	090
44901		A	Drain app abscess, percut	3.37	20.70	26.15	1.16	1.12	0.22	24.29	29.74	4.75	4.71	000
44950		A	Appendectomy	10.48	NA	NA	4.04	4.25	1.31	NA	NA	15.83	16.04	090
44955		A	Appendectomy add-on	1.53	NA	NA	0.40	0.51	0.20	NA	NA	2.13	2.24	ZZZ
44960		A	Appendectomy	14.33	NA	NA	5.39	5.36	1.63	NA	NA	21.35	21.32	090
44970		A	Laparoscopy, appendectomy	9.31	NA	NA	4.19	4.12	1.14	NA	NA	14.64	14.57	090
45000		A	Drainage of pelvic abscess	6.16	NA	NA	3.59	3.13	0.52	NA	NA	10.27	9.81	090
45005		A	Drainage of rectal abscess	1.99	3.99	4.04	1.59	1.58	0.25	6.23	6.28	3.83	3.82	010
45020		A	Drainage of rectal abscess	8.37	NA	NA	4.58	3.61	0.55	NA	NA	13.50	12.53	090
45100		A	Biopsy of rectum	3.92	NA	NA	2.83	2.49	0.44	NA	NA	7.19	6.85	090
45108		A	Removal of anorectal lesion	5.00	NA	NA	3.06	2.85	0.59	NA	NA	8.65	8.44	090
45110		A	Removal of rectum	30.49	NA	NA	11.83	12.28	3.35	NA	NA	45.67	46.12	090
45111		A	Partial removal of rectum	17.81	NA	NA	6.98	7.13	2.06	NA	NA	26.85	27.00	090
45112		A	Removal of rectum	32.99	NA	NA	10.24	11.40	3.42	NA	NA	46.65	47.81	090
45113		A	Partial proctectomy	33.03	NA	NA	11.44	12.33	3.48	NA	NA	47.95	48.84	090
45114		A	Partial removal of rectum	30.57	NA	NA	10.29	10.75	3.35	NA	NA	44.21	44.67	090
45116		A	Partial removal of rectum	27.50	NA	NA	9.35	9.88	2.87	NA	NA	39.72	40.25	090
45119		A	Remove rectum w/reservoir	33.29	NA	NA	11.56	12.26	3.35	NA	NA	48.20	48.90	090
45120		A	Removal of rectum	26.15	NA	NA	9.31	9.94	2.89	NA	NA	38.35	38.98	090
45121		A	Removal of rectum and colon	28.83	NA	NA	10.19	10.90	3.24	NA	NA	42.26	42.97	090
45123		A	Partial proctectomy	18.64	NA	NA	6.99	6.90	1.85	NA	NA	27.48	27.39	090
45126		A	Pelvic exenteration	48.81	NA	NA	17.12	18.73	4.32	NA	NA	70.25	71.86	090
45130		A	Excision of rectal prolapse	18.31	NA	NA	6.65	6.75	1.79	NA	NA	26.75	26.85	090
45135		A	Excision of rectal prolapse	22.07	NA	NA	9.27	8.64	2.35	NA	NA	33.69	33.06	090
45136		A	Excise ileoanal reservior	30.55	NA	NA	11.74	12.35	2.81	NA	NA	45.10	45.71	090
45150		A	Excision of rectal stricture	5.72	NA	NA	3.39	3.08	0.61	NA	NA	9.72	9.41	090
45160		A	Excision of rectal lesion	16.11	NA	NA	6.53	6.63	1.67	NA	NA	24.31	24.41	090
45170		A	Excision of rectal lesion	12.42	NA	NA	5.35	5.28	1.35	NA	NA	19.12	19.05	090
45190		A	Destruction, rectal tumor	10.23	NA	NA	4.94	4.71	1.13	NA	NA	16.30	16.07	090
45300		A	Proctosigmoidoscopy dx	0.38	2.00	1.65	0.35	0.30	0.04	2.42	2.07	0.77	0.72	000
45303		A	Proctosigmoidoscopy dilate	0.44	19.69	18.97	0.38	0.34	0.05	20.18	19.46	0.87	0.83	000
45305		A	Proctosigmoidoscopy w/bx	1.01	3.31	2.81	0.53	0.51	0.11	4.43	3.93	1.65	1.63	000
45307		A	Proctosigmoidoscopy fb	0.94	3.50	3.16	0.50	0.49	0.11	4.55	4.21	1.55	1.54	000
45308		A	Proctosigmoidoscopy removal	0.83	3.31	2.33	0.49	0.45	0.09	4.23	3.25	1.41	1.37	000
45309		A	Proctosigmoidoscopy removal	2.01	3.74	3.05	0.83	0.84	0.22	5.97	5.28	3.06	3.07	000
45315		A	Proctosigmoidoscopy removal	1.40	3.75	3.09	0.65	0.64	0.15	5.30	4.64	2.20	2.19	000
45317		A	Proctosigmoidoscopy bleed	1.50	3.85	2.79	0.66	0.66	0.15	5.50	4.44	2.31	2.31	000
45320		A	Proctosigmoidoscopy ablate	1.58	4.53	3.32	0.76	0.72	0.16	6.27	5.06	2.50	2.46	000
45321		A	Proctosigmoidoscopy volvul	1.17	NA	NA	0.66	0.59	0.13	NA	NA	1.96	1.89	000
45327		A	Proctosigmoidoscopy w/stent	1.65	NA	NA	0.86	0.73	0.16	NA	NA	2.67	2.54	000
45330		A	Diagnostic sigmoidoscopy	0.96	2.54	2.35	0.63	0.53	0.08	3.58	3.39	1.67	1.57	000
45331		A	Sigmoidoscopy and biopsy	1.15	3.34	3.15	0.81	0.65	0.09	4.58	4.39	2.05	1.89	000
45332		A	Sigmoidoscopy w/fb removal	1.79	5.77	5.20	1.06	0.87	0.16	7.72	7.15	3.01	2.82	000
45333		A	Sigmoidoscopy & polypectomy	1.79	5.76	5.10	1.01	0.85	0.15	7.70	7.04	2.95	2.79	000

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
45334		A	Sigmoidoscopy for bleeding	2.73	NA	NA	1.58	1.25	0.20	NA	NA	4.51	4.18	000
45335		A	Sigmoidoscopy w/submuc inj	1.46	5.47	3.78	0.93	0.75	0.11	7.04	5.35	2.50	2.32	000
45337		A	Sigmoidoscopy & decompress	2.36	NA	NA	1.27	1.07	0.21	NA	NA	3.84	3.64	000
45338		A	Sigmoidoscopy w/tumr remove	2.34	6.02	5.43	1.31	1.08	0.19	8.55	7.96	3.84	3.61	000
45339		A	Sigmoidoscopy w/ablate tumr	3.14	5.92	4.08	1.73	1.39	0.26	9.32	7.48	5.13	4.79	000
45340		A	Sig w/balloon dilation	1.89	10.51	7.27	1.07	0.89	0.15	12.55	9.31	3.11	2.93	000
45341		A	Sigmoidoscopy w/ultrasound	2.60	NA	NA	1.51	1.18	0.19	NA	NA	4.30	3.97	000
45342		A	Sigmoidoscopy w/us guide bx	4.05	NA	NA	2.25	1.72	0.30	NA	NA	6.60	6.07	000
45345		A	Sigmoidoscopy w/stent	2.92	NA	NA	1.60	1.27	0.23	NA	NA	4.75	4.42	000
45355		A	Surgical colonoscopy	3.51	NA	NA	1.59	1.43	0.36	NA	NA	5.46	5.30	000
45378		A	Diagnostic colonoscopy	3.69	6.55	6.26	1.88	1.57	0.30	10.54	10.25	5.87	5.56	000
45378	53	A	Diagnostic sigmoidoscopy	0.96	2.54	2.35	0.63	0.53	0.08	3.58	3.39	1.67	1.57	000
45379		A	Colonoscopy w/fb removal	4.68	8.37	7.85	2.28	1.94	0.39	13.44	12.92	7.35	7.01	000
45380		A	Colonoscopy and biopsy	4.43	7.96	7.40	2.31	1.88	0.35	12.74	12.18	7.09	6.66	000
45381		A	Colonoscopy, submucous inj	4.19	7.94	7.33	2.24	1.80	0.30	12.43	11.82	6.73	6.29	000
45382		A	Colonoscopy/control bleeding	5.68	10.67	10.15	3.00	2.39	0.41	16.76	16.24	9.09	8.48	000
45383		A	Lesion removal colonoscopy	5.86	8.78	8.15	2.73	2.36	0.48	15.12	14.49	9.07	8.70	000
45384		A	Lesion remove colonoscopy	4.69	7.40	6.97	2.27	1.94	0.38	12.47	12.04	7.34	7.01	000
45385		A	Lesion removal colonoscopy	5.30	8.59	8.01	2.67	2.20	0.42	14.31	13.73	8.39	7.92	000
45386		A	Colonoscopy dilate stricture	4.57	12.65	12.49	2.25	1.91	0.39	17.61	17.45	7.21	6.87	000
45387		A	Colonoscopy w/stent	5.90	NA	NA	3.01	2.51	0.48	NA	NA	9.39	8.89	000
45391		A	Colonoscopy w/endoscope us	5.09	NA	NA	2.66	2.15	0.42	NA	NA	8.17	7.66	000
45392		A	Colonoscopy w/endoscopic fnb	6.54	NA	NA	3.23	2.68	0.42	NA	NA	10.19	9.64	000
45395		A	Lap, removal of rectum	32.71	NA	NA	12.90	13.51	3.62	NA	NA	49.23	49.84	090
45397		A	Lap, remove rectum w/pouch	36.21	NA	NA	13.43	14.08	3.66	NA	NA	53.30	53.95	090
45400		A	Laparoscopic proctopexy	19.25	NA	NA	7.09	7.66	2.02	NA	NA	28.36	28.93	090
45402		A	Lap proctopexy w/sig resect	26.32	NA	NA	8.74	9.69	2.81	NA	NA	37.87	38.82	090
45500		A	Repair of rectum	7.58	NA	NA	3.79	3.60	0.75	NA	NA	12.12	11.93	090
45505		A	Repair of rectum	8.14	NA	NA	4.52	4.03	0.86	NA	NA	13.52	13.03	090
45520		A	Treatment of rectal prolapse	0.55	3.08	2.00	0.41	0.38	0.05	3.68	2.60	1.01	0.98	000
45540		A	Correct rectal prolapse	17.98	NA	NA	5.73	6.54	1.84	NA	NA	25.55	26.36	090
45541		A	Correct rectal prolapse	14.66	NA	NA	5.96	5.96	1.55	NA	NA	22.17	22.17	090
45550		A	Repair rectum/remove sigmoid	24.61	NA	NA	8.34	9.02	2.61	NA	NA	35.56	36.24	090
45560		A	Repair of rectocele	11.38	NA	NA	4.95	5.03	1.13	NA	NA	17.46	17.54	090
45562		A	Exploration/repair of rectum	17.74	NA	NA	7.58	7.15	1.83	NA	NA	27.15	26.72	090
45563		A	Exploration/repair of rectum	26.14	NA	NA	10.28	10.48	3.10	NA	NA	39.52	39.72	090
45800		A	Repair rect/bladder fistula	20.12	NA	NA	8.67	7.75	1.85	NA	NA	30.64	29.72	090
45805		A	Repair fistula w/colostomy	23.13	NA	NA	8.51	9.28	2.02	NA	NA	33.66	34.43	090
45820		A	Repair rectourethral fistula	20.18	NA	NA	8.82	7.94	1.58	NA	NA	30.58	29.70	090
45825		A	Repair fistula w/colostomy	23.93	NA	NA	10.39	9.98	2.31	NA	NA	36.63	36.22	090
45900		A	Reduction of rectal prolapse	2.94	NA	NA	1.68	1.55	0.30	NA	NA	4.92	4.79	010
45905		A	Dilation of anal sphincter	2.30	NA	NA	1.65	1.49	0.27	NA	NA	4.22	4.06	010
45910		A	Dilation of rectal narrowing	2.80	NA	NA	1.81	1.70	0.30	NA	NA	4.91	4.80	010
45915		A	Remove rectal obstruction	3.14	4.26	4.31	2.04	2.09	0.30	7.70	7.75	5.48	5.53	010
45990		A	Surg dx exam, anorectal	1.80	NA	NA	0.78	0.79	0.17	NA	NA	2.75	2.76	000
46020		A	Placement of seton	2.90	3.27	2.57	2.35	1.98	0.31	6.48	5.78	5.56	5.19	010
46030		A	Removal of rectal marker	1.23	1.89	1.49	0.81	0.74	0.14	3.26	2.86	2.18	2.11	010
46040		A	Incision of rectal abscess	5.20	6.71	5.81	4.14	3.73	0.62	12.53	11.63	9.96	9.55	090
46045		A	Incision of rectal abscess	5.75	NA	NA	3.83	3.13	0.54	NA	NA	10.12	9.42	090
46050		A	Incision of anal abscess	1.19	3.19	2.71	0.97	0.87	0.14	4.52	4.04	2.30	2.20	010
46060		A	Incision of rectal abscess	6.18	NA	NA	3.82	3.39	0.67	NA	NA	10.67	10.24	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
46070		A	Incision of anal septum	2.71	NA	NA	1.86	1.85	0.36	NA	NA	4.93	4.92	090
46080		A	Incision of anal sphincter	2.49	3.07	2.55	1.12	1.13	0.30	5.86	5.34	3.91	3.92	010
46083		A	Incise external hemorrhoid	1.40	2.34	2.48	0.94	0.93	0.15	3.89	4.03	2.49	2.48	010
46200		A	Removal of anal fissure	3.41	6.30	4.47	3.72	3.08	0.39	10.10	8.27	7.52	6.88	090
46210		A	Removal of anal crypt	2.67	5.96	5.33	3.36	2.81	0.31	8.94	8.31	6.34	5.79	090
46211		A	Removal of anal crypts	4.24	7.18	5.86	4.12	3.66	0.48	11.90	10.58	8.84	8.38	090
46220		A	Removal of anal tag	1.56	3.00	2.48	1.09	0.99	0.17	4.73	4.21	2.82	2.72	010
46221		A	Ligation of hemorrhoid(s)	2.29	3.74	2.92	2.00	1.81	0.23	6.26	5.44	4.52	4.33	010
46230		A	Removal of anal tags	2.57	3.50	3.19	1.32	1.30	0.30	6.37	6.06	4.19	4.17	010
46250		A	Hemorrhoidectomy	4.13	5.99	5.49	2.84	2.68	0.48	10.60	10.10	7.45	7.29	090
46255		A	Hemorrhoidectomy	4.84	6.41	5.99	3.10	2.91	0.58	11.83	11.41	8.52	8.33	090
46257		A	Remove hemorrhoids & fissure	5.64	NA	NA	3.22	2.97	0.64	NA	NA	9.50	9.25	090
46258		A	Remove hemorrhoids & fistula	6.22	NA	NA	3.85	3.42	0.68	NA	NA	10.75	10.32	090
46260		A	Hemorrhoidectomy	6.61	NA	NA	3.46	3.26	0.76	NA	NA	10.83	10.63	090
46261		A	Remove hemorrhoids & fissure	7.57	NA	NA	4.17	3.75	0.79	NA	NA	12.53	12.11	090
46262		A	Remove hemorrhoids & fistula	7.74	NA	NA	4.09	3.83	0.83	NA	NA	12.66	12.40	090
46270		A	Removal of anal fistula	4.75	5.94	5.24	3.53	3.01	0.46	11.15	10.45	8.74	8.22	090
46275		A	Removal of anal fistula	5.25	6.28	5.05	3.63	3.14	0.52	12.05	10.82	9.40	8.91	090
46280		A	Removal of anal fistula	6.22	NA	NA	3.79	3.39	0.66	NA	NA	10.67	10.27	090
46285		A	Removal of anal fistula	5.25	6.07	4.35	3.46	2.93	0.44	11.76	10.04	9.15	8.62	090
46288		A	Repair anal fistula	7.62	NA	NA	4.09	3.78	0.79	NA	NA	12.50	12.19	090
46320		A	Removal of hemorrhoid clot	1.61	2.41	2.20	0.88	0.86	0.18	4.20	3.99	2.67	2.65	010
46500		A	Injection into hemorrhoid(s)	1.61	3.61	2.49	1.24	1.17	0.16	5.38	4.26	3.01	2.94	010
46505		A	Chemodenervation anal musc	3.11	3.28	3.11	2.29	2.05	0.14	6.53	6.36	5.54	5.30	010
46600		A	Diagnostic anoscopy	0.50	1.48	1.54	0.37	0.35	0.05	2.03	2.09	0.92	0.90	000
46604		A	Anoscopy and dilation	1.31	12.66	10.03	0.58	0.61	0.12	14.09	11.46	2.01	2.04	000
46606		A	Anoscopy and biopsy	0.81	4.01	3.85	0.47	0.44	0.09	4.91	4.75	1.37	1.34	000
46608		A	Anoscopy, remove for body	1.51	4.04	4.32	0.61	0.64	0.16	5.71	5.99	2.28	2.31	000
46610		A	Anoscopy, remove lesion	1.32	4.32	4.11	0.67	0.63	0.15	5.79	5.58	2.14	2.10	000
46611		A	Anoscopy	1.81	2.88	3.23	0.72	0.77	0.19	4.88	5.23	2.72	2.77	000
46612		A	Anoscopy, remove lesions	2.34	5.54	5.29	0.95	0.97	0.28	8.16	7.91	3.57	3.59	000
46614		A	Anoscopy, control bleeding	2.01	2.79	2.45	0.83	0.84	0.20	5.00	4.66	3.04	3.05	000
46615		A	Anoscopy	2.68	2.42	2.47	0.96	1.04	0.33	5.43	5.48	3.97	4.05	000
46700		A	Repair of anal stricture	9.62	NA	NA	4.55	4.30	0.94	NA	NA	15.11	14.86	090
46705		A	Repair of anal stricture	7.25	NA	NA	3.55	3.66	0.91	NA	NA	11.71	11.82	090
46706		A	Repr of anal fistula w/glue	2.39	NA	NA	1.44	1.30	0.28	NA	NA	4.11	3.97	010
46710		A	Repr per/vag pouch sngl proc	16.95	NA	NA	7.70	7.75	1.38	NA	NA	26.03	26.08	090
46712		A	Repr per/vag pouch dbl proc	36.26	NA	NA	13.98	14.81	3.66	NA	NA	53.90	54.73	090
46715		A	Rep perf anoper fistu	7.49	NA	NA	3.24	3.50	0.92	NA	NA	11.65	11.91	090
46716		A	Rep perf anoper/vestib fistu	17.04	NA	NA	8.96	8.23	1.58	NA	NA	27.58	26.85	090
46730		A	Construction of absent anus	30.05	NA	NA	10.92	11.77	2.46	NA	NA	43.43	44.28	090
46735		A	Construction of absent anus	35.54	NA	NA	12.73	13.37	3.20	NA	NA	51.47	52.11	090
46740		A	Construction of absent anus	33.30	NA	NA	13.86	13.41	2.41	NA	NA	49.57	49.12	090
46742		A	Repair of imperforated anus	39.54	NA	NA	15.36	16.91	3.19	NA	NA	58.09	59.64	090
46744		A	Repair of cloacal anomaly	58.34	NA	NA	20.47	21.00	6.38	NA	NA	85.19	85.72	090
46746		A	Repair of cloacal anomaly	64.79	NA	NA	18.82	23.61	7.68	NA	NA	91.29	96.08	090
46748		A	Repair of cloacal anomaly	70.77	NA	NA	20.16	22.82	3.36	NA	NA	94.29	96.95	090
46750		A	Repair of anal sphincter	11.96	NA	NA	5.19	5.09	1.10	NA	NA	18.25	18.15	090
46751		A	Repair of anal sphincter	9.12	NA	NA	3.91	5.05	0.94	NA	NA	13.97	15.11	090
46753		A	Reconstruction of anus	8.77	NA	NA	4.01	3.89	0.94	NA	NA	13.72	13.60	090
46754		A	Removal of suture from anus	2.82	3.70	3.63	2.25	1.82	0.19	6.71	6.64	5.26	4.83	010
46760		A	Repair of anal sphincter	17.11	NA	NA	7.67	7.24	1.59	NA	NA	26.37	25.94	090

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CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
46761		A	Repair of anal sphincter	15.10	NA	NA	5.83	5.97	1.43	NA	NA	22.36	22.50	090
46762		A	Implant artificial sphincter	14.58	NA	NA	6.23	5.71	1.24	NA	NA	22.05	21.53	090
46900		A	Destruction, anal lesion(s)	1.91	3.62	2.85	1.29	1.28	0.17	5.70	4.93	3.37	3.36	010
46910		A	Destruction, anal lesion(s)	1.86	3.88	3.15	1.19	1.09	0.19	5.93	5.20	3.24	3.14	010
46916		A	Cryosurgery, anal lesion(s)	1.86	3.73	3.30	1.55	1.43	0.11	5.70	5.27	3.52	3.40	010
46917		A	Laser surgery, anal lesions	1.86	8.71	9.04	1.20	1.14	0.21	10.78	11.11	3.27	3.21	010
46922		A	Excision of anal lesion(s)	1.86	4.13	3.49	1.19	1.10	0.22	6.21	5.57	3.27	3.18	010
46924		A	Destruction, anal lesion(s)	2.76	9.62	8.94	1.52	1.39	0.26	12.64	11.96	4.54	4.41	010
46934		A	Destruction of hemorrhoids	3.75	5.42	5.17	2.80	2.92	0.32	9.49	9.24	6.87	6.99	090
46935		A	Destruction of hemorrhoids	2.43	3.68	3.52	1.07	1.18	0.23	6.34	6.18	3.73	3.84	010
46936		A	Destruction of hemorrhoids	3.68	6.25	5.22	2.64	2.54	0.34	10.27	9.24	6.66	6.56	090
46937		A	Cryotherapy of rectal lesion	2.69	4.06	3.10	1.82	1.37	0.14	6.89	5.93	4.65	4.20	010
46938		A	Cryotherapy of rectal lesion	4.65	5.81	4.45	3.63	3.20	0.58	11.04	9.68	8.86	8.43	090
46940		A	Treatment of anal fissure	2.32	2.84	2.21	1.03	1.08	0.23	5.39	4.76	3.58	3.63	010
46942		A	Treatment of anal fissure	2.04	2.81	2.08	0.95	1.00	0.19	5.04	4.31	3.18	3.23	010
46945		A	Ligation of hemorrhoids	2.09	4.86	3.67	3.01	2.61	0.19	7.14	5.95	5.29	4.89	090
46946		A	Ligation of hemorrhoids	2.58	4.70	3.97	2.69	2.47	0.27	7.55	6.82	5.54	5.32	090
46947		A	Hemorrhoidopexy by stapling	5.45	NA	NA	3.09	2.81	0.75	NA	NA	9.29	9.01	090
47000		A	Needle biopsy of liver	1.90	8.03	4.32	0.69	0.65	0.12	10.05	6.34	2.71	2.67	000
47001		A	Needle biopsy, liver add-on	1.90	NA	NA	0.48	0.61	0.25	NA	NA	2.63	2.76	ZZZ
47010		A	Open drainage, liver lesion	19.21	NA	NA	8.30	8.38	1.80	NA	NA	29.31	29.39	090
47011		A	Percut drain, liver lesion	3.69	NA	NA	1.30	1.23	0.22	NA	NA	5.21	5.14	000
47015		A	Inject/aspirate liver cyst	18.31	NA	NA	7.77	7.57	1.83	NA	NA	27.91	27.71	090
47100		A	Wedge biopsy of liver	12.72	NA	NA	6.19	6.09	1.53	NA	NA	20.44	20.34	090
47120		A	Partial removal of liver	38.74	NA	NA	13.87	14.85	4.65	NA	NA	57.26	58.24	090
47122		A	Extensive removal of liver	59.29	NA	NA	18.54	20.76	7.19	NA	NA	85.02	87.24	090
47125		A	Partial removal of liver	52.85	NA	NA	16.83	18.88	6.45	NA	NA	76.13	78.18	090
47130		A	Partial removal of liver	57.00	NA	NA	17.83	20.22	6.94	NA	NA	81.77	84.16	090
47135		R	Transplantation of liver	83.15	NA	NA	27.52	30.57	9.93	NA	NA	120.6	123.7	090
47136		R	Transplantation of liver	70.25	NA	NA	23.37	26.16	8.41	NA	NA	102.0	104.8	090
47140		A	Partial removal, donor liver	59.14	NA	NA	21.53	22.13	5.17	NA	NA	85.84	86.44	090
47141		A	Partial removal, donor liver	71.17	NA	NA	25.24	26.55	5.17	NA	NA	101.6	102.9	090
47142		A	Partial removal, donor liver	79.11	NA	NA	27.24	28.97	5.17	NA	NA	111.5	113.3	090
47146		A	Prep donor liver/venous	6.00	NA	NA	1.51	1.92	0.83	NA	NA	8.34	8.75	XXX
47147		A	Prep donor liver/arterial	7.00	NA	NA	1.76	2.24	0.97	NA	NA	9.73	10.21	XXX
47300		A	Surgery for liver lesion	17.95	NA	NA	7.50	7.31	1.98	NA	NA	27.43	27.24	090
47350		A	Repair liver wound	22.30	NA	NA	8.72	8.85	2.58	NA	NA	33.60	33.73	090
47360		A	Repair liver wound	31.12	NA	NA	11.32	11.53	3.37	NA	NA	45.81	46.02	090
47361		A	Repair liver wound	52.41	NA	NA	16.60	18.07	5.85	NA	NA	74.86	76.33	090
47362		A	Repair liver wound	23.35	NA	NA	9.10	8.83	2.50	NA	NA	34.95	34.68	090
47370		A	Laparo ablate liver tumor rf	20.61	NA	NA	7.64	8.02	2.55	NA	NA	30.80	31.18	090
47371		A	Laparo ablate liver cryosurg	20.61	NA	NA	8.10	8.15	2.60	NA	NA	31.31	31.36	090
47380		A	Open ablate liver tumor rf	24.37	NA	NA	8.60	9.19	2.86	NA	NA	35.83	36.42	090
47381		A	Open ablate liver tumor cryo	24.64	NA	NA	9.12	9.49	2.84	NA	NA	36.60	36.97	090
47382		A	Percut ablate liver rf	15.17	NA	NA	6.21	6.12	0.96	NA	NA	22.34	22.25	010
47400		A	Incision of liver duct	36.17	NA	NA	13.15	13.39	3.07	NA	NA	52.39	52.63	090
47420		A	Incision of bile duct	21.86	NA	NA	8.44	8.70	2.62	NA	NA	32.92	33.18	090
47425		A	Incision of bile duct	22.14	NA	NA	8.48	8.74	2.61	NA	NA	33.23	33.49	090
47460		A	Incise bile duct sphincter	20.35	NA	NA	9.00	8.54	2.20	NA	NA	31.55	31.09	090
47480		A	Incision of gallbladder	13.06	NA	NA	6.55	6.08	1.42	NA	NA	21.03	20.56	090
47490		A	Incision of gallbladder	8.00	NA	NA	5.29	5.51	0.43	NA	NA	13.72	13.94	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
47500		A	Injection for liver x-rays	1.96	NA	NA	0.70	0.66	0.12	NA	NA	2.78	2.74	000
47505		A	Injection for liver x-rays	0.76	NA	NA	0.27	0.26	0.04	NA	NA	1.07	1.06	000
47510		A	Insert catheter, bile duct	7.88	NA	NA	4.69	4.94	0.46	NA	NA	13.03	13.28	090
47511		A	Insert bile duct drain	10.72	NA	NA	5.09	5.09	0.62	NA	NA	16.43	16.43	090
47525		A	Change bile duct catheter	5.54	15.68	15.27	2.74	2.79	0.33	21.55	21.14	8.61	8.66	010
47530		A	Revise/reinsert bile tube	5.90	32.21	33.46	3.52	3.67	0.37	38.48	39.73	9.79	9.94	090
47550		A	Bile duct endoscopy add-on	3.02	NA	NA	0.77	0.96	0.40	NA	NA	4.19	4.38	ZZZ
47552		A	Biliary endoscopy thru skin	6.03	NA	NA	2.52	2.42	0.42	NA	NA	8.97	8.87	000
47553		A	Biliary endoscopy thru skin	6.34	NA	NA	2.25	2.12	0.37	NA	NA	8.96	8.83	000
47554		A	Biliary endoscopy thru skin	9.05	NA	NA	3.27	3.34	0.96	NA	NA	13.28	13.35	000
47555		A	Biliary endoscopy thru skin	7.55	NA	NA	2.76	2.54	0.45	NA	NA	10.76	10.54	000
47556		A	Biliary endoscopy thru skin	8.55	NA	NA	3.07	2.86	0.50	NA	NA	12.12	11.91	000
47560		A	Laparoscopy w/cholangio	4.88	NA	NA	1.24	1.56	0.65	NA	NA	6.77	7.09	000
47561		A	Laparo w/cholangio/biopsy	5.17	NA	NA	1.55	1.83	0.66	NA	NA	7.38	7.66	000
47562		A	Laparoscopic cholecystectomy	11.57	NA	NA	4.87	4.96	1.46	NA	NA	17.90	17.99	090
47563		A	Laparo cholecystectomy/graph	11.98	NA	NA	5.06	5.25	1.58	NA	NA	18.62	18.81	090
47564		A	Laparo cholecystectomy/explr	14.21	NA	NA	5.42	5.83	1.88	NA	NA	21.51	21.92	090
47570		A	Laparo cholecystoenterostomy	12.56	NA	NA	5.04	5.30	1.65	NA	NA	19.25	19.51	090
47600		A	Removal of gallbladder	15.44	NA	NA	6.12	6.14	1.79	NA	NA	23.35	23.37	090
47605		A	Removal of gallbladder	15.86	NA	NA	6.24	6.44	1.94	NA	NA	24.04	24.24	090
47610		A	Removal of gallbladder	20.80	NA	NA	7.54	7.84	2.48	NA	NA	30.82	31.12	090
47612		A	Removal of gallbladder	21.09	NA	NA	7.55	7.81	2.47	NA	NA	31.11	31.37	090
47620		A	Removal of gallbladder	22.95	NA	NA	8.05	8.41	2.73	NA	NA	33.73	34.09	090
47630		A	Remove bile duct stone	9.52	NA	NA	4.86	4.88	0.65	NA	NA	15.03	15.05	090
47700		A	Exploration of bile ducts	16.32	NA	NA	7.11	7.34	2.06	NA	NA	25.49	25.72	090
47701		A	Bile duct revision	28.55	NA	NA	9.85	11.09	3.67	NA	NA	42.07	43.31	090
47711		A	Excision of bile duct tumor	25.71	NA	NA	9.40	9.81	3.04	NA	NA	38.15	38.56	090
47712		A	Excision of bile duct tumor	33.53	NA	NA	11.36	12.17	3.92	NA	NA	48.81	49.62	090
47715		A	Excision of bile duct cyst	21.36	NA	NA	8.40	8.43	2.48	NA	NA	32.24	32.27	090
47716		A	Fusion of bile duct cyst	19.01	NA	NA	7.73	7.81	2.14	NA	NA	28.88	28.96	090
47720		A	Fuse gallbladder & bowel	18.15	NA	NA	7.57	7.50	2.10	NA	NA	27.82	27.75	090
47721		A	Fuse upper gi structures	21.80	NA	NA	8.44	8.54	2.52	NA	NA	32.76	32.86	090
47740		A	Fuse gallbladder & bowel	21.04	NA	NA	8.33	8.37	2.41	NA	NA	31.78	31.82	090
47741		A	Fuse gallbladder & bowel	24.02	NA	NA	9.08	9.25	2.82	NA	NA	35.92	36.09	090
47760		A	Fuse bile ducts and bowel	38.08	NA	NA	12.57	11.29	3.41	NA	NA	54.06	52.78	090
47765		A	Fuse liver ducts & bowel	51.95	NA	NA	16.38	12.20	3.29	NA	NA	71.62	67.44	090
47780		A	Fuse bile ducts and bowel	42.08	NA	NA	13.80	11.87	3.49	NA	NA	59.37	57.44	090
47785		A	Fuse bile ducts and bowel	55.95	NA	NA	17.31	14.03	4.09	NA	NA	77.35	74.07	090
47800		A	Reconstruction of bile ducts	25.98	NA	NA	9.56	9.94	3.07	NA	NA	38.61	38.99	090
47801		A	Placement, bile duct support	17.41	NA	NA	8.57	8.26	1.16	NA	NA	27.14	26.83	090
47802		A	Fuse liver duct & intestine	24.74	NA	NA	9.35	9.60	2.85	NA	NA	36.94	37.19	090
47900		A	Suture bile duct injury	22.25	NA	NA	8.56	8.80	2.64	NA	NA	33.45	33.69	090
48000		A	Drainage of abdomen	31.76	NA	NA	10.94	11.38	3.47	NA	NA	46.17	46.61	090
48001		A	Placement of drain, pancreas	39.50	NA	NA	12.54	13.56	4.68	NA	NA	56.72	57.74	090
48005		A	Resect/debride pancreas	48.97	NA	NA	15.75	16.38	5.54	NA	NA	70.26	70.89	090
48020		A	Removal of pancreatic stone	18.90	NA	NA	7.43	7.34	2.12	NA	NA	28.45	28.36	090
48100		A	Biopsy of pancreas, open	14.34	NA	NA	5.79	5.65	1.62	NA	NA	21.75	21.61	090
48102		A	Needle biopsy, pancreas	4.67	10.07	8.50	1.91	1.94	0.28	15.02	13.45	6.86	6.89	010
48120		A	Removal of pancreas lesion	18.29	NA	NA	6.76	6.84	2.09	NA	NA	27.14	27.22	090
48140		A	Partial removal of pancreas	26.13	NA	NA	9.21	9.47	3.02	NA	NA	38.36	38.62	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
48145		A	Partial removal of pancreas	27.20	NA	NA	9.56	9.77	3.17	NA	NA	39.93	40.14	090
48146		A	Pancreatectomy	30.34	NA	NA	11.72	11.93	3.49	NA	NA	45.55	45.76	090
48148		A	Removal of pancreatic duct	20.20	NA	NA	7.93	7.69	2.29	NA	NA	30.42	30.18	090
48150		A	Partial removal of pancreas	52.55	NA	NA	17.87	19.12	6.30	NA	NA	76.72	77.97	090
48152		A	Pancreatectomy	48.39	NA	NA	16.44	17.78	5.78	NA	NA	70.61	71.95	090
48153		A	Pancreatectomy	52.53	NA	NA	17.71	19.11	6.29	NA	NA	76.53	77.93	090
48154		A	Pancreatectomy	48.62	NA	NA	16.73	17.88	5.82	NA	NA	71.17	72.32	090
48155		A	Removal of pancreas	29.19	NA	NA	11.82	11.72	3.26	NA	NA	44.27	44.17	090
48180		A	Fuse pancreas and bowel	27.90	NA	NA	9.76	10.07	3.27	NA	NA	40.93	41.24	090
48400		A	Injection, intraop add-on	1.95	NA	NA	0.88	0.70	0.15	NA	NA	2.98	2.80	ZZZ
48500		A	Surgery of pancreatic cyst	17.97	NA	NA	7.95	7.49	2.02	NA	NA	27.94	27.48	090
48510		A	Drain pancreatic pseudocyst	17.00	NA	NA	7.48	7.46	1.82	NA	NA	26.30	26.28	090
48511		A	Drain pancreatic pseudocyst	3.99	21.19	21.01	1.41	1.34	0.24	25.42	25.24	5.64	5.57	000
48520		A	Fuse pancreas cyst and bowel	18.03	NA	NA	6.63	6.69	2.05	NA	NA	26.71	26.77	090
48540		A	Fuse pancreas cyst and bowel	21.82	NA	NA	7.59	7.99	2.60	NA	NA	32.01	32.41	090
48545		A	Pancreatorrhaphy	22.04	NA	NA	7.98	7.99	2.37	NA	NA	32.39	32.40	090
48547		A	Duodenal exclusion	30.19	NA	NA	10.16	10.42	3.41	NA	NA	43.76	44.02	090
48552		A	Prep donor pancreas/venous	4.30	NA	NA	1.13	1.38	0.31	NA	NA	5.74	5.99	XXX
48554		R	Transpl allograft pancreas	36.77	NA	NA	20.52	18.86	4.18	NA	NA	61.47	59.81	090
48556		A	Removal, allograft pancreas	19.16	NA	NA	9.41	8.41	2.07	NA	NA	30.64	29.64	090
49000		A	Exploration of abdomen	12.40	NA	NA	5.20	5.34	1.52	NA	NA	19.12	19.26	090
49002		A	Reopening of abdomen	17.51	NA	NA	6.65	5.43	1.37	NA	NA	25.53	24.31	090
49010		A	Exploration behind abdomen	15.94	NA	NA	6.63	6.09	1.51	NA	NA	24.08	23.54	090
49020		A	Drain abdominal abscess	26.38	NA	NA	9.92	10.14	2.84	NA	NA	39.14	39.36	090
49021		A	Drain abdominal abscess	3.37	20.65	21.00	1.19	1.13	0.20	24.22	24.57	4.76	4.70	000
49040		A	Drain, open, abdom abscess	16.35	NA	NA	6.53	6.46	1.69	NA	NA	24.57	24.50	090
49041		A	Drain, percut, abdom abscess	3.99	20.90	19.90	1.41	1.34	0.24	25.13	24.13	5.64	5.57	000
49060		A	Drain, open, retrop abscess	18.36	NA	NA	7.38	7.43	1.74	NA	NA	27.48	27.53	090
49061		A	Drain, percut, retroper absc	3.69	20.77	19.95	1.31	1.24	0.22	24.68	23.86	5.22	5.15	000
49062		A	Drain to peritoneal cavity	12.08	NA	NA	5.27	5.40	1.39	NA	NA	18.74	18.87	090
49080		A	Puncture, peritoneal cavity	1.35	2.84	3.70	0.48	0.47	0.08	4.27	5.13	1.91	1.90	000
49081		A	Removal of abdominal fluid	1.26	3.04	2.70	0.47	0.44	0.09	4.39	4.05	1.82	1.79	000
49085		A	Remove abdomen foreign body	13.97	NA	NA	5.56	5.52	1.62	NA	NA	21.15	21.11	090
49180		A	Biopsy, abdominal mass	1.73	2.57	2.98	0.61	0.58	0.10	4.40	4.81	2.44	2.41	000
49200		A	Removal of abdominal lesion	10.89	NA	NA	4.88	4.99	1.24	NA	NA	17.01	17.12	090
49201		A	Remove abdom lesion, complex	15.60	NA	NA	6.39	6.88	1.87	NA	NA	23.86	24.35	090
49215		A	Excise sacral spine tumor	37.60	NA	NA	12.46	13.68	4.37	NA	NA	54.43	55.65	090
49220		A	Multiple surgery, abdomen	15.64	NA	NA	6.23	6.54	1.88	NA	NA	23.75	24.06	090
49250		A	Excision of umbilicus	8.88	NA	NA	4.27	4.27	1.08	NA	NA	14.23	14.23	090
49255		A	Removal of omentum	12.35	NA	NA	5.61	5.62	1.43	NA	NA	19.39	19.40	090
49320		A	Diag laparo separate proc	5.34	NA	NA	2.50	2.61	0.65	NA	NA	8.49	8.60	010
49321		A	Laparoscopy, biopsy	5.39	NA	NA	2.55	2.63	0.70	NA	NA	8.64	8.72	010
49322		A	Laparoscopy, aspiration	5.94	NA	NA	2.62	2.91	0.71	NA	NA	9.27	9.56	010
49323		A	Laparo drain lymphocele	10.09	NA	NA	4.70	4.55	1.20	NA	NA	15.99	15.84	090
49400		A	Air injection into abdomen	1.88	2.55	2.95	0.62	0.62	0.15	4.58	4.98	2.65	2.65	000
49419		A	Insrt abdom cath for chemotx	7.01	NA	NA	3.54	3.56	0.81	NA	NA	11.36	11.38	090
49420		A	Insert abdom drain, temp	2.22	NA	NA	1.21	1.12	0.21	NA	NA	3.64	3.55	000
49421		A	Insert abdom drain, perm	5.83	NA	NA	3.17	3.16	0.74	NA	NA	9.74	9.73	090
49422		A	Remove perm cannula/catheter	6.24	NA	NA	2.64	2.84	0.83	NA	NA	9.71	9.91	010
49423		A	Exchange drainage catheter	1.46	13.85	14.05	0.56	0.53	0.09	15.40	15.60	2.11	2.08	000

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
49424		A	Assess cyst, contrast inject	0.76	3.24	3.60	0.30	0.29	0.04	4.04	4.40	1.10	1.09	000
49425		A	Insert abdomen-venous drain	12.07	NA	NA	5.31	5.54	1.54	NA	NA	18.92	19.15	090
49426		A	Revise abdomen-venous shunt	10.28	NA	NA	4.55	4.72	1.28	NA	NA	16.11	16.28	090
49427		A	Injection, abdominal shunt	0.89	NA	NA	0.31	0.30	0.07	NA	NA	1.27	1.26	000
49428		A	Ligation of shunt	6.75	NA	NA	3.04	3.71	0.80	NA	NA	10.59	11.26	010
49429		A	Removal of shunt	7.39	NA	NA	3.01	3.33	1.02	NA	NA	11.42	11.74	010
49491		A	Rpr hern preemie reduc	12.36	NA	NA	5.39	5.14	1.40	NA	NA	19.15	18.90	090
49492		A	Rpr ing hern premie, blocked	15.26	NA	NA	5.76	6.03	1.80	NA	NA	22.82	23.09	090
49495		A	Rpr ing hernia baby, reduc	6.13	NA	NA	2.97	2.96	0.74	NA	NA	9.84	9.83	090
49496		A	Rpr ing hernia baby, blocked	9.28	NA	NA	4.36	4.30	1.07	NA	NA	14.71	14.65	090
49500		A	Rpr ing hernia, init, reduce	5.72	NA	NA	3.57	3.23	0.71	NA	NA	10.00	9.66	090
49501		A	Rpr ing hernia, init blocked	9.24	NA	NA	4.24	4.22	1.12	NA	NA	14.60	14.58	090
49505		A	Prp i/hern init reduc >5 yr	7.84	NA	NA	3.88	3.78	1.03	NA	NA	12.75	12.65	090
49507		A	Prp i/hern init block >5 yr	9.93	NA	NA	4.45	4.46	1.27	NA	NA	15.65	15.66	090
49520		A	Rerepair ing hernia, reduce	9.87	NA	NA	4.37	4.42	1.28	NA	NA	15.52	15.57	090
49521		A	Rerepair ing hernia, blocked	12.32	NA	NA	4.98	5.18	1.59	NA	NA	18.89	19.09	090
49525		A	Repair ing hernia, sliding	8.81	NA	NA	4.13	4.09	1.13	NA	NA	14.07	14.03	090
49540		A	Repair lumbar hernia	10.62	NA	NA	4.63	4.72	1.37	NA	NA	16.62	16.71	090
49550		A	Rpr rem hernia, init, reduce	8.87	NA	NA	4.10	4.12	1.14	NA	NA	14.11	14.13	090
49553		A	Rpr fem hernia, init blocked	9.80	NA	NA	4.40	4.42	1.24	NA	NA	15.44	15.46	090
49555		A	Rerepair fem hernia, reduce	9.27	NA	NA	4.21	4.26	1.20	NA	NA	14.68	14.73	090
49557		A	Rerepair fem hernia, blocked	11.50	NA	NA	4.84	4.95	1.47	NA	NA	17.81	17.92	090
49560		A	Rpr ventral hern init, reduc	11.80	NA	NA	4.86	5.08	1.52	NA	NA	18.18	18.40	090
49561		A	Rpr ventral hern init, block	15.26	NA	NA	5.79	6.00	1.88	NA	NA	22.93	23.14	090
49565		A	Rerepair ventrl hern, reduce	12.25	NA	NA	5.10	5.20	1.52	NA	NA	18.87	18.97	090
49566		A	Rerepair ventrl hern, block	15.41	NA	NA	5.84	6.07	1.90	NA	NA	23.15	23.38	090
49568		A	Hernia repair w/mesh	4.88	NA	NA	1.24	1.56	0.64	NA	NA	6.76	7.08	ZZZ
49570		A	Rpr epigastric hern, reduce	5.93	NA	NA	3.33	3.21	0.75	NA	NA	10.01	9.89	090
49572		A	Rpr epigastric hern, blocked	7.75	NA	NA	3.82	3.56	0.88	NA	NA	12.45	12.19	090
49580		A	Rpr umbil hern, reduc < 5 yr	4.35	NA	NA	3.00	2.70	0.54	NA	NA	7.89	7.59	090
49582		A	Rpr umbil hern, block < 5 yr	7.01	NA	NA	3.60	3.50	0.88	NA	NA	11.49	11.39	090
49585		A	Rpr umbil hern, reduc > 5 yr	6.47	NA	NA	3.51	3.35	0.82	NA	NA	10.80	10.64	090
49587		A	Rpr umbil hern, block > 5 yr	7.92	NA	NA	3.86	3.77	0.99	NA	NA	12.77	12.68	090
49590		A	Repair spigelian hernia	8.78	NA	NA	4.09	4.09	1.13	NA	NA	14.00	14.00	090
49600		A	Repair umbilical lesion	11.42	NA	NA	5.18	5.30	1.32	NA	NA	17.92	18.04	090
49605		A	Repair umbilical lesion	86.79	NA	NA	26.31	28.01	9.36	NA	NA	122.5	124.2	090
49606		A	Repair umbilical lesion	18.87	NA	NA	6.57	7.42	2.45	NA	NA	27.89	28.74	090
49610		A	Repair umbilical lesion	10.78	NA	NA	4.75	5.10	1.07	NA	NA	16.60	16.95	090
49611		A	Repair umbilical lesion	9.21	NA	NA	3.87	6.21	0.78	NA	NA	13.86	16.20	090
49650		A	Laparo hernia repair initial	6.26	NA	NA	3.34	3.24	0.93	NA	NA	10.53	10.43	090
49651		A	Laparo hernia repair recur	8.23	NA	NA	4.16	4.08	1.14	NA	NA	13.53	13.45	090
49900		A	Repair of abdominal wall	12.26	NA	NA	6.26	6.25	1.62	NA	NA	20.14	20.13	090
49904		A	Omental flap, extra-abdom	22.06	NA	NA	11.99	14.44	2.69	NA	NA	36.74	39.19	090
49905		A	Omental flap, intra-abdom	6.54	NA	NA	1.72	2.16	0.75	NA	NA	9.01	9.45	ZZZ
50010		A	Exploration of kidney	12.07	NA	NA	7.02	5.68	0.93	NA	NA	20.02	18.68	090
50020		A	Renal abscess, open drain	17.80	NA	NA	8.80	8.02	1.34	NA	NA	27.94	27.16	090
50021		A	Renal abscess, percut drain	3.37	22.24	21.84	1.21	1.13	0.20	25.81	25.41	4.78	4.70	000
50040		A	Drainage of kidney	16.40	NA	NA	9.23	7.42	1.03	NA	NA	26.66	24.85	090
50045		A	Exploration of kidney	16.61	NA	NA	8.73	7.14	1.24	NA	NA	26.58	24.99	090
50060		A	Removal of kidney stone	20.74	NA	NA	11.44	8.74	1.36	NA	NA	33.54	30.84	090
50065		A	Incision of kidney	22.11	NA	NA	12.04	7.58	1.59	NA	NA	35.74	31.28	090
50070		A	Incision of kidney	21.64	NA	NA	11.85	9.14	1.44	NA	NA	34.93	32.22	090
50075		A	Removal of kidney stone	26.83	NA	NA	14.21	10.99	1.80	NA	NA	42.84	39.62	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
50080		A	Removal of kidney stone	15.55	NA	NA	8.91	6.95	1.04	NA	NA	25.50	23.54	090
50081		A	Removal of kidney stone	23.24	NA	NA	12.70	9.76	1.54	NA	NA	37.48	34.54	090
50100		A	Revise kidney blood vessels	17.24	NA	NA	7.21	7.65	2.06	NA	NA	26.51	26.95	090
50120		A	Exploration of kidney	17.00	NA	NA	9.16	7.38	1.21	NA	NA	27.37	25.59	090
50125		A	Explore and drain kidney	17.61	NA	NA	10.15	7.77	1.43	NA	NA	29.19	26.81	090
50130		A	Removal of kidney stone	18.61	NA	NA	10.41	7.99	1.22	NA	NA	30.24	27.82	090
50135		A	Exploration of kidney	20.38	NA	NA	11.11	8.62	1.33	NA	NA	32.82	30.33	090
50200		A	Biopsy of kidney	2.63	NA	NA	1.19	1.27	0.16	NA	NA	3.98	4.06	000
50205		A	Biopsy of kidney	12.15	NA	NA	5.62	5.17	1.30	NA	NA	19.07	18.62	090
50220		A	Remove kidney, open	18.47	NA	NA	9.89	7.91	1.35	NA	NA	29.71	27.73	090
50225		A	Removal kidney open, complex	21.67	NA	NA	11.46	8.99	1.50	NA	NA	34.63	32.16	090
50230		A	Removal kidney open, radical	23.62	NA	NA	12.16	9.48	1.55	NA	NA	37.33	34.65	090
50234		A	Removal of kidney & ureter	23.84	NA	NA	12.56	9.78	1.59	NA	NA	37.99	35.21	090
50236		A	Removal of kidney & ureter	26.66	NA	NA	14.52	11.33	1.76	NA	NA	42.94	39.75	090
50240		A	Partial removal of kidney	23.93	NA	NA	13.15	10.06	1.55	NA	NA	38.63	35.54	090
50250		A	Cryoablate renal mass open	21.98	NA	NA	11.56	9.78	1.39	NA	NA	34.93	33.15	090
50280		A	Removal of kidney lesion	16.88	NA	NA	9.60	7.43	1.19	NA	NA	27.67	25.50	090
50290		A	Removal of kidney lesion	15.94	NA	NA	8.37	6.95	1.41	NA	NA	25.72	24.30	090
50320		A	Remove kidney, living donor	22.18	NA	NA	12.63	11.17	2.35	NA	NA	37.16	35.70	090
50327		A	Prep renal graft/venous	4.00	NA	NA	1.09	1.29	0.29	NA	NA	5.38	5.58	XXX
50328		A	Prep renal graft/arterial	3.50	NA	NA	0.97	1.13	0.26	NA	NA	4.73	4.89	XXX
50329		A	Prep renal graft/ureteral	3.34	NA	NA	0.99	1.10	0.25	NA	NA	4.58	4.69	XXX
50340		A	Removal of kidney	13.78	NA	NA	7.64	6.79	1.65	NA	NA	23.07	22.22	090
50360		A	Transplantation of kidney	40.27	NA	NA	18.85	16.35	3.81	NA	NA	62.93	60.43	090
50365		A	Transplantation of kidney	45.49	NA	NA	19.38	18.53	4.42	NA	NA	69.29	68.44	090
50370		A	Remove transplanted kidney	18.60	NA	NA	9.32	7.70	1.67	NA	NA	29.59	27.97	090
50380		A	Reimplantation of kidney	29.47	NA	NA	16.48	13.16	2.50	NA	NA	48.45	45.13	090
50382		A	Change ureter stent, percut	5.50	27.61	34.07	2.04	1.91	0.34	33.45	39.91	7.88	7.75	000
50384		A	Remove ureter stent, percut	5.00	26.44	33.10	1.86	1.75	0.31	31.75	38.41	7.17	7.06	000
50387		A	Change ext/int ureter stent	2.00	13.31	17.02	0.73	0.69	0.12	15.43	19.14	2.85	2.81	000
50389		A	Remove renal tube w/fluoro	1.10	7.05	11.35	0.40	0.38	0.07	8.22	12.52	1.57	1.55	000
50390		A	Drainage of kidney lesion	1.96	NA	NA	0.70	0.66	0.12	NA	NA	2.78	2.74	000
50391		A	Instll rx agnt into rnal tub	1.96	1.55	1.57	0.82	0.68	0.14	3.65	3.67	2.92	2.78	000
50392		A	Insert kidney drain	3.37	NA	NA	1.53	1.52	0.20	NA	NA	5.10	5.09	000
50393		A	Insert ureteral tube	4.15	NA	NA	1.81	1.80	0.25	NA	NA	6.21	6.20	000
50394		A	Injection for kidney x-ray	0.76	1.97	2.51	0.60	0.65	0.05	2.78	3.32	1.41	1.46	000
50395		A	Create passage to kidney	3.37	NA	NA	1.59	1.52	0.21	NA	NA	5.17	5.10	000
50396		A	Measure kidney pressure	2.09	NA	NA	1.10	1.09	0.13	NA	NA	3.32	3.31	000
50398		A	Change kidney tube	1.46	12.52	15.40	0.57	0.53	0.09	14.07	16.95	2.12	2.08	000
50400		A	Revision of kidney/ureter	21.06	NA	NA	11.45	8.78	1.38	NA	NA	33.89	31.22	090
50405		A	Revision of kidney/ureter	25.60	NA	NA	13.53	10.17	1.78	NA	NA	40.91	37.55	090
50500		A	Repair of kidney wound	21.01	NA	NA	9.37	8.64	2.01	NA	NA	32.39	31.66	090
50520		A	Close kidney-skin fistula	18.67	NA	NA	9.59	7.98	1.49	NA	NA	29.75	28.14	090
50525		A	Repair renal-abdomen fistula	24.13	NA	NA	11.13	9.55	1.83	NA	NA	37.09	35.51	090
50526		A	Repair renal-abdomen fistula	26.05	NA	NA	7.99	9.41	1.96	NA	NA	36.00	37.42	090
50540		A	Revision of horseshoe kidney	20.89	NA	NA	11.09	9.03	1.36	NA	NA	33.34	31.28	090
50541		A	Laparo ablate renal cyst	16.72	NA	NA	9.08	7.15	1.13	NA	NA	26.93	25.00	090
50542		A	Laparo ablate renal mass	21.12	NA	NA	11.61	9.02	1.39	NA	NA	34.12	31.53	090
50543		A	Laparo partial nephrectomy	27.10	NA	NA	14.62	11.32	1.80	NA	NA	43.52	40.22	090
50544		A	Laparoscopy, pyeloplasty	23.23	NA	NA	11.87	9.37	1.58	NA	NA	36.68	34.18	090
50545		A	Laparo radical nephrectomy	24.89	NA	NA	12.72	10.09	1.70	NA	NA	39.31	36.68	090
50546		A	Laparoscopic nephrectomy	21.63	NA	NA	11.70	9.21	1.57	NA	NA	34.90	32.41	090

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CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
50547		A	Laparo removal donor kidney	26.20	NA	NA	12.68	11.52	2.76	NA	NA	41.64	40.48	090
50548		A	Laparo remove w/ureter	25.22	NA	NA	12.65	10.06	1.72	NA	NA	39.59	37.00	090
50551		A	Kidney endoscopy	5.59	4.73	4.30	2.74	2.17	0.40	10.72	10.29	8.73	8.16	000
50553		A	Kidney endoscopy	5.98	4.65	4.44	2.70	2.31	0.39	11.02	10.81	9.07	8.68	000
50555		A	Kidney endoscopy & biopsy	6.52	5.27	4.93	3.13	2.54	0.45	12.24	11.90	10.10	9.51	000
50557		A	Kidney endoscopy & treatment	6.61	5.42	4.80	3.16	2.52	0.47	12.50	11.88	10.24	9.60	000
50561		A	Kidney endoscopy & treatment	7.58	5.99	5.32	3.56	2.88	0.54	14.11	13.44	11.68	11.00	000
50562		A	Renal scope w/tumor resect	10.90	NA	NA	5.59	4.64	0.73	NA	NA	17.22	16.27	090
50570		A	Kidney endoscopy	9.53	NA	NA	4.41	3.52	0.68	NA	NA	14.62	13.73	000
50572		A	Kidney endoscopy	10.33	NA	NA	4.75	3.82	0.85	NA	NA	15.93	15.00	000
50574		A	Kidney endoscopy & biopsy	11.00	NA	NA	5.03	4.07	0.77	NA	NA	16.80	15.84	000
50575		A	Kidney endoscopy	13.96	NA	NA	6.25	5.04	0.99	NA	NA	21.20	19.99	000
50576		A	Kidney endoscopy & treatment	10.97	NA	NA	5.02	4.01	0.78	NA	NA	16.77	15.76	000
50580		A	Kidney endoscopy & treatment	11.84	NA	NA	5.34	4.31	0.83	NA	NA	18.01	16.98	000
50590		A	Fragmenting of kidney stone	9.58	17.79	13.77	6.49	4.71	0.65	28.02	24.00	16.72	14.94	090
50592		A	Perc rf ablate renal tumor	6.75	79.58	132.0	2.99	2.99	0.43	86.76	139.2	10.17	10.17	010
50600		A	Exploration of ureter	16.98	NA	NA	8.78	7.21	1.13	NA	NA	26.89	25.32	090
50605		A	Insert ureteral support	16.60	NA	NA	8.15	7.10	1.45	NA	NA	26.20	25.15	090
50610		A	Removal of ureter stone	17.06	NA	NA	9.30	7.56	1.43	NA	NA	27.79	26.05	090
50620		A	Removal of ureter stone	16.24	NA	NA	9.22	7.07	1.07	NA	NA	26.53	24.38	090
50630		A	Removal of ureter stone	16.02	NA	NA	8.49	6.84	1.09	NA	NA	25.60	23.95	090
50650		A	Removal of ureter	18.61	NA	NA	10.44	8.04	1.23	NA	NA	30.28	27.88	090
50660		A	Removal of ureter	20.81	NA	NA	11.16	8.77	1.38	NA	NA	33.35	30.96	090
50684		A	Injection for ureter x-ray	0.76	4.25	4.80	0.66	0.52	0.05	5.06	5.61	1.47	1.33	000
50686		A	Measure ureter pressure	1.51	2.04	3.10	0.70	0.79	0.11	3.66	4.72	2.32	2.41	000
50688		A	Change of ureter tube/stent	1.17	NA	NA	0.98	1.04	0.07	NA	NA	2.22	2.28	010
50690		A	Injection for ureter x-ray	1.16	1.50	1.75	0.76	0.73	0.07	2.73	2.98	1.99	1.96	000
50700		A	Revision of ureter	16.48	NA	NA	8.79	7.55	1.27	NA	NA	26.54	25.30	090
50715		A	Release of ureter	20.43	NA	NA	8.61	8.72	2.13	NA	NA	31.17	31.28	090
50722		A	Release of ureter	17.74	NA	NA	8.01	7.87	1.90	NA	NA	27.65	27.51	090
50725		A	Release/revise ureter	19.99	NA	NA	9.87	8.51	1.52	NA	NA	31.38	30.02	090
50727		A	Revise ureter	8.17	NA	NA	5.91	4.69	0.61	NA	NA	14.69	13.47	090
50728		A	Revise ureter	12.00	NA	NA	7.35	6.02	1.00	NA	NA	20.35	19.02	090
50740		A	Fusion of ureter & kidney	19.86	NA	NA	9.13	8.10	1.96	NA	NA	30.95	29.92	090
50750		A	Fusion of ureter & kidney	21.01	NA	NA	9.98	8.50	1.38	NA	NA	32.37	30.89	090
50760		A	Fusion of ureters	19.86	NA	NA	10.02	8.27	1.55	NA	NA	31.43	29.68	090
50770		A	Splicing of ureters	21.01	NA	NA	10.99	8.74	1.45	NA	NA	33.45	31.20	090
50780		A	Reimplant ureter in bladder	19.74	NA	NA	10.38	8.30	1.51	NA	NA	31.63	29.55	090
50782		A	Reimplant ureter in bladder	19.51	NA	NA	8.49	8.72	1.61	NA	NA	29.61	29.84	090
50783		A	Reimplant ureter in bladder	20.52	NA	NA	10.24	8.73	1.98	NA	NA	32.74	31.23	090
50785		A	Reimplant ureter in bladder	22.02	NA	NA	11.48	9.10	1.45	NA	NA	34.95	32.57	090
50800		A	Implant ureter in bowel	16.15	NA	NA	9.59	7.26	1.19	NA	NA	26.93	24.60	090
50810		A	Fusion of ureter & bowel	22.28	NA	NA	9.60	9.23	2.31	NA	NA	34.19	33.82	090
50815		A	Urine shunt to intestine	21.98	NA	NA	11.93	9.33	1.54	NA	NA	35.45	32.85	090
50820		A	Construct bowel bladder	23.81	NA	NA	12.30	9.57	1.89	NA	NA	38.00	35.27	090
50825		A	Construct bowel bladder	30.40	NA	NA	15.50	12.24	2.07	NA	NA	47.97	44.71	090
50830		A	Revise urine flow	33.49	NA	NA	16.37	13.24	2.37	NA	NA	52.23	49.10	090
50840		A	Replace ureter by bowel	22.11	NA	NA	12.26	9.40	1.47	NA	NA	35.84	32.98	090
50845		A	Appendico-vesicostomy	22.11	NA	NA	12.76	9.88	1.57	NA	NA	36.44	33.56	090
50860		A	Transplant ureter to skin	16.87	NA	NA	9.41	7.33	1.29	NA	NA	27.57	25.49	090
50900		A	Repair of ureter	14.83	NA	NA	8.28	6.68	1.14	NA	NA	24.25	22.65	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
50920		A	Closure ureter/skin fistula	15.60	NA	NA	8.79	7.13	1.01	NA	NA	25.40	23.74	090
50930		A	Closure ureter/bowel fistula	19.98	NA	NA	10.54	8.62	1.28	NA	NA	31.80	29.88	090
50940		A	Release of ureter	15.72	NA	NA	8.41	6.91	1.26	NA	NA	25.39	23.89	090
50945		A	Laparoscopy ureterolithotomy	17.83	NA	NA	9.01	7.54	1.36	NA	NA	28.20	26.73	090
50947		A	Laparo new ureter/bladder	25.57	NA	NA	12.82	10.49	2.16	NA	NA	40.55	38.22	090
50948		A	Laparo new ureter/bladder	23.65	NA	NA	12.39	9.63	1.70	NA	NA	37.74	34.98	090
50951		A	Endoscopy of ureter	5.83	4.99	4.47	2.87	2.26	0.41	11.23	10.71	9.11	8.50	000
50953		A	Endoscopy of ureter	6.23	5.19	4.61	3.41	2.63	0.43	11.85	11.27	10.07	9.29	000
50955		A	Ureter endoscopy & biopsy	6.74	5.45	6.19	3.65	2.93	0.48	12.67	13.41	10.87	10.15	000
50957		A	Ureter endoscopy & treatment	6.78	5.53	4.81	3.26	2.60	0.48	12.79	12.07	10.52	9.86	000
50961		A	Ureter endoscopy & treatment	6.04	5.00	4.53	2.93	2.38	0.41	11.45	10.98	9.38	8.83	000
50970		A	Ureter endoscopy	7.13	NA	NA	3.40	2.70	0.52	NA	NA	11.05	10.35	000
50972		A	Ureter endoscopy & catheter	6.88	NA	NA	3.28	2.67	0.49	NA	NA	10.65	10.04	000
50974		A	Ureter endoscopy & biopsy	9.16	NA	NA	4.14	3.37	0.64	NA	NA	13.94	13.17	000
50976		A	Ureter endoscopy & treatment	9.03	NA	NA	3.95	3.29	0.66	NA	NA	13.64	12.98	000
50980		A	Ureter endoscopy & treatment	6.84	NA	NA	3.25	2.60	0.48	NA	NA	10.57	9.92	000
51000		A	Drainage of bladder	0.78	0.96	1.70	0.28	0.25	0.05	1.79	2.53	1.11	1.08	000
51005		A	Drainage of bladder	1.02	2.44	4.14	0.30	0.33	0.10	3.56	5.26	1.42	1.45	000
51010		A	Drainage of bladder	4.25	4.90	5.44	2.44	2.02	0.28	9.43	9.97	6.97	6.55	010
51020		A	Incise & treat bladder	7.50	NA	NA	5.45	4.26	0.47	NA	NA	13.42	12.23	090
51030		A	Incise & treat bladder	7.62	NA	NA	4.70	4.16	0.58	NA	NA	12.90	12.36	090
51040		A	Incise & drain bladder	4.39	NA	NA	3.82	3.03	0.31	NA	NA	8.52	7.73	090
51045		A	Incise bladder/drain ureter	7.62	NA	NA	5.40	4.30	0.52	NA	NA	13.54	12.44	090
51050		A	Removal of bladder stone	7.83	NA	NA	5.53	4.12	0.49	NA	NA	13.85	12.44	090
51060		A	Removal of ureter stone	9.76	NA	NA	6.60	5.03	0.62	NA	NA	16.98	15.41	090
51065		A	Remove ureter calculus	9.76	NA	NA	6.53	4.90	0.63	NA	NA	16.92	15.29	090
51080		A	Drainage of bladder abscess	6.57	NA	NA	4.49	3.79	0.43	NA	NA	11.49	10.79	090
51500		A	Removal of bladder cyst	10.86	NA	NA	5.84	5.22	1.03	NA	NA	17.73	17.11	090
51520		A	Removal of bladder lesion	10.02	NA	NA	6.68	5.18	0.69	NA	NA	17.39	15.89	090
51525		A	Removal of bladder lesion	15.23	NA	NA	8.91	6.83	0.99	NA	NA	25.13	23.05	090
51530		A	Removal of bladder lesion	13.52	NA	NA	7.47	6.19	1.05	NA	NA	22.04	20.76	090
51535		A	Repair of ureter lesion	13.71	NA	NA	7.68	6.51	1.23	NA	NA	22.62	21.45	090
51550		A	Partial removal of bladder	17.04	NA	NA	9.12	7.34	1.31	NA	NA	27.47	25.69	090
51555		A	Partial removal of bladder	22.97	NA	NA	11.82	9.47	1.69	NA	NA	36.48	34.13	090
51565		A	Revise bladder & ureter(s)	23.42	NA	NA	12.37	9.83	1.63	NA	NA	37.42	34.88	090
51570		A	Removal of bladder	27.24	NA	NA	13.72	10.75	1.71	NA	NA	42.67	39.70	090
51575		A	Removal of bladder & nodes	33.93	NA	NA	17.31	13.37	2.16	NA	NA	53.40	49.46	090
51580		A	Remove bladder/revise tract	35.05	NA	NA	18.16	13.93	2.24	NA	NA	55.45	51.22	090
51585		A	Removal of bladder & nodes	39.32	NA	NA	20.24	15.36	2.48	NA	NA	62.04	57.16	090
51590		A	Remove bladder/revise tract	36.08	NA	NA	18.00	13.98	2.27	NA	NA	56.35	52.33	090
51595		A	Remove bladder/revise tract	41.03	NA	NA	20.38	15.72	2.59	NA	NA	64.00	59.34	090
51596		A	Remove bladder/create pouch	43.90	NA	NA	22.03	16.95	2.77	NA	NA	68.70	63.62	090
51597		A	Removal of pelvic structures	42.51	NA	NA	20.66	16.31	2.81	NA	NA	65.98	61.63	090
51600		A	Injection for bladder x-ray	0.88	4.41	4.90	0.33	0.30	0.06	5.35	5.84	1.27	1.24	000
51605		A	Preparation for bladder xray	0.64	3.04	5.31	0.44	0.37	0.04	3.72	5.99	1.12	1.05	000
51610		A	Injection for bladder x-ray	1.05	1.99	2.22	0.73	0.63	0.07	3.11	3.34	1.85	1.75	000
51700		A	Irrigation of bladder	0.88	1.55	1.59	0.35	0.30	0.06	2.49	2.53	1.29	1.24	000
51701		A	Insert bladder catheter	0.50	1.06	1.45	0.25	0.21	0.04	1.60	1.99	0.79	0.75	000
51702		A	Insert temp bladder cath	0.50	1.56	1.96	0.35	0.27	0.04	2.10	2.50	0.89	0.81	000
51703		A	Insert bladder cath, complex	1.47	2.34	2.64	0.84	0.63	0.10	3.91	4.21	2.41	2.20	000
51705		A	Change of bladder tube	1.02	2.08	2.23	0.87	0.68	0.07	3.17	3.32	1.96	1.77	010
51710		A	Change of bladder tube	1.49	2.82	3.21	1.22	0.88	0.11	4.42	4.81	2.82	2.48	010

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
51715		A	Endoscopic injection/implant	3.73	2.84	3.64	1.80	1.46	0.29	6.86	7.66	5.82	5.48	000
51720		A	Treatment of bladder lesion	1.50	1.68	1.73	0.78	0.71	0.14	3.32	3.37	2.42	2.35	000
51725		A	Simple cystometrogram	1.51	4.39	5.30	NA	NA	0.16	6.06	6.97	NA	NA	000
51725	26	A	Simple cystometrogram	1.51	0.58	0.51	0.58	0.51	0.12	2.21	2.14	2.21	2.14	000
51725	TC	A	Simple cystometrogram	0.00	3.81	4.79	NA	NA	0.04	3.85	4.83	NA	NA	000
51726		A	Complex cystometrogram	1.71	7.29	7.46	NA	NA	0.18	9.18	9.35	NA	NA	000
51726	26	A	Complex cystometrogram	1.71	0.66	0.59	0.66	0.59	0.13	2.50	2.43	2.50	2.43	000
51726	TC	A	Complex cystometrogram	0.00	6.63	6.88	NA	NA	0.05	6.68	6.93	NA	NA	000
51736		A	Urine flow measurement	0.61	0.92	0.67	NA	NA	0.06	1.59	1.34	NA	NA	000
51736	26	A	Urine flow measurement	0.61	0.23	0.21	0.23	0.21	0.05	0.89	0.87	0.89	0.87	000
51736	TC	A	Urine flow measurement	0.00	0.69	0.46	NA	NA	0.01	0.70	0.47	NA	NA	000
51741		A	Electro-uroflowmetry, first	1.14	1.30	0.92	NA	NA	0.11	2.55	2.17	NA	NA	000
51741	26	A	Electro-uroflowmetry, first	1.14	0.46	0.39	0.46	0.39	0.09	1.69	1.62	1.69	1.62	000
51741	TC	A	Electro-uroflowmetry, first	0.00	0.84	0.53	NA	NA	0.02	0.86	0.55	NA	NA	000
51772		A	Urethra pressure profile	1.61	5.12	5.47	NA	NA	0.20	6.93	7.28	NA	NA	000
51772	26	A	Urethra pressure profile	1.61	0.56	0.55	0.56	0.55	0.15	2.32	2.31	2.32	2.31	000
51772	TC	A	Urethra pressure profile	0.00	4.57	4.92	NA	NA	0.05	4.62	4.97	NA	NA	000
51784		A	Anal/urinary muscle study	1.53	3.89	3.97	NA	NA	0.16	5.58	5.66	NA	NA	000
51784	26	A	Anal/urinary muscle study	1.53	0.52	0.51	0.52	0.51	0.12	2.17	2.16	2.17	2.16	000
51784	TC	A	Anal/urinary muscle study	0.00	3.36	3.46	NA	NA	0.04	3.40	3.50	NA	NA	000
51785		A	Anal/urinary muscle study	1.53	4.59	4.49	NA	NA	0.15	6.27	6.17	NA	NA	000
51785	26	A	Anal/urinary muscle study	1.53	0.57	0.52	0.57	0.52	0.11	2.21	2.16	2.21	2.16	000
51785	TC	A	Anal/urinary muscle study	0.00	4.02	3.97	NA	NA	0.04	4.06	4.01	NA	NA	000
51792		A	Urinary reflex study	1.10	5.07	5.78	NA	NA	0.20	6.37	7.08	NA	NA	000
51792	26	A	Urinary reflex study	1.10	0.40	0.41	0.40	0.41	0.07	1.57	1.58	1.57	1.58	000
51792	TC	A	Urinary reflex study	0.00	4.67	5.37	NA	NA	0.13	4.80	5.50	NA	NA	000
51795		A	Urine voiding pressure study	1.53	6.89	7.21	NA	NA	0.22	8.64	8.96	NA	NA	000
51795	26	A	Urine voiding pressure study	1.53	0.59	0.52	0.59	0.52	0.12	2.24	2.17	2.24	2.17	000
51795	TC	A	Urine voiding pressure study	0.00	6.30	6.68	NA	NA	0.10	6.40	6.78	NA	NA	000
51797		A	Intraabdominal pressure test	1.60	4.96	5.59	NA	NA	0.17	6.73	7.36	NA	NA	000
51797	26	A	Intraabdominal pressure test	1.60	0.62	0.55	0.62	0.55	0.12	2.34	2.27	2.34	2.27	000
51797	TC	A	Intraabdominal pressure test	0.00	4.34	5.04	NA	NA	0.05	4.39	5.09	NA	NA	000
51798		A	Us urine capacity measure	0.00	0.61	0.41	NA	NA	0.08	0.69	0.49	NA	NA	XXX
51800		A	Revision of bladder/urethra	18.68	NA	NA	10.38	8.28	1.32	NA	NA	30.38	28.28	090
51820		A	Revision of urinary tract	19.33	NA	NA	10.81	8.93	1.74	NA	NA	31.88	30.00	090
51840		A	Attach bladder/urethra	11.23	NA	NA	5.82	5.64	1.06	NA	NA	18.11	17.93	090
51841		A	Attach bladder/urethra	13.55	NA	NA	6.91	6.52	1.24	NA	NA	21.70	21.31	090
51845		A	Repair bladder neck	10.02	NA	NA	5.98	5.06	0.79	NA	NA	16.79	15.87	090
51860		A	Repair of bladder wound	12.42	NA	NA	6.93	6.06	1.16	NA	NA	20.51	19.64	090
51865		A	Repair of bladder wound	15.62	NA	NA	8.67	7.19	1.23	NA	NA	25.52	24.04	090
51880		A	Repair of bladder opening	7.77	NA	NA	4.79	4.17	0.72	NA	NA	13.28	12.66	090
51900		A	Repair bladder/vagina lesion	14.42	NA	NA	8.19	6.61	1.21	NA	NA	23.82	22.24	090
51920		A	Close bladder-uterus fistula	13.20	NA	NA	7.97	6.23	1.18	NA	NA	22.35	20.61	090
51925		A	Hysterectomy/bladder repair	17.27	NA	NA	10.57	9.12	2.03	NA	NA	29.87	28.42	090
51940		A	Correction of bladder defect	30.40	NA	NA	11.32	11.91	2.14	NA	NA	43.86	44.45	090
51960		A	Revision of bladder & bowel	25.12	NA	NA	13.51	10.62	1.63	NA	NA	40.26	37.37	090
51980		A	Construct bladder opening	12.38	NA	NA	7.48	5.91	0.86	NA	NA	20.72	19.15	090
51990		A	Laparo urethral suspension	13.22	NA	NA	5.96	6.11	1.39	NA	NA	20.57	20.72	090
51992		A	Laparo sling operation	14.73	NA	NA	6.65	6.33	1.41	NA	NA	22.79	22.47	090
52000		A	Cystoscopy	2.23	3.15	3.27	1.20	0.87	0.14	5.52	5.64	3.57	3.24	000

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
52001		A	Cystoscopy, removal of clots	5.44	4.84	5.02	2.57	2.05	0.39	10.67	10.85	8.40	7.88	000
52005		A	Cystoscopy & ureter catheter	2.37	5.54	5.57	1.32	1.00	0.17	8.08	8.11	3.86	3.54	000
52007		A	Cystoscopy and biopsy	3.02	11.07	15.14	1.69	1.29	0.22	14.31	18.38	4.93	4.53	000
52010		A	Cystoscopy & duct catheter	3.02	8.38	10.18	1.69	1.29	0.21	11.61	13.41	4.92	4.52	000
52204		A	Cystoscopy	2.59	8.58	13.06	1.44	1.04	0.17	11.34	15.82	4.20	3.80	000
52214		A	Cystoscopy and treatment	3.70	20.50	33.78	1.91	1.48	0.26	24.46	37.74	5.87	5.44	000
52224		A	Cystoscopy and treatment	3.14	19.66	32.34	1.68	1.28	0.22	23.02	35.70	5.04	4.64	000
52234		A	Cystoscopy and treatment	4.62	NA	NA	2.38	1.84	0.33	NA	NA	7.33	6.79	000
52235		A	Cystoscopy and treatment	5.44	NA	NA	2.76	2.15	0.39	NA	NA	8.59	7.98	000
52240		A	Cystoscopy and treatment	9.71	NA	NA	4.56	3.62	0.69	NA	NA	14.96	14.02	000
52250		A	Cystoscopy and radiotracer	4.49	NA	NA	2.42	1.84	0.32	NA	NA	7.23	6.65	000
52260		A	Cystoscopy and treatment	3.91	NA	NA	2.03	1.57	0.28	NA	NA	6.22	5.76	000
52265		A	Cystoscopy and treatment	2.94	7.89	12.01	1.57	1.23	0.22	11.05	15.17	4.73	4.39	000
52270		A	Cystoscopy & revise urethra	3.36	7.24	10.11	1.82	1.39	0.24	10.84	13.71	5.42	4.99	000
52275		A	Cystoscopy & revise urethra	4.69	9.61	14.10	2.38	1.84	0.33	14.63	19.12	7.40	6.86	000
52276		A	Cystoscopy and treatment	4.99	NA	NA	2.56	1.98	0.35	NA	NA	7.90	7.32	000
52277		A	Cystoscopy and treatment	6.16	NA	NA	2.97	2.42	0.44	NA	NA	9.57	9.02	000
52281		A	Cystoscopy and treatment	2.80	5.28	6.65	1.62	1.22	0.20	8.28	9.65	4.62	4.22	000
52282		A	Cystoscopy, implant stent	6.39	NA	NA	3.10	2.46	0.45	NA	NA	9.94	9.30	000
52283		A	Cystoscopy and treatment	3.73	3.97	3.96	1.97	1.53	0.26	7.96	7.95	5.96	5.52	000
52285		A	Cystoscopy and treatment	3.60	4.19	4.06	1.94	1.48	0.26	8.05	7.92	5.80	5.34	000
52290		A	Cystoscopy and treatment	4.58	NA	NA	2.37	1.83	0.32	NA	NA	7.27	6.73	000
52300		A	Cystoscopy and treatment	5.30	NA	NA	2.72	2.11	0.38	NA	NA	8.40	7.79	000
52301		A	Cystoscopy and treatment	5.50	NA	NA	2.15	2.03	0.46	NA	NA	8.11	7.99	000
52305		A	Cystoscopy and treatment	5.30	NA	NA	2.61	2.05	0.38	NA	NA	8.29	7.73	000
52310		A	Cystoscopy and treatment	2.81	4.15	4.56	1.49	1.15	0.20	7.16	7.57	4.50	4.16	000
52315		A	Cystoscopy and treatment	5.20	6.87	8.24	2.59	2.03	0.37	12.44	13.81	8.16	7.60	000
52317		A	Remove bladder stone	6.71	17.64	26.18	3.14	2.50	0.48	24.83	33.37	10.33	9.69	000
52318		A	Remove bladder stone	9.18	NA	NA	4.24	3.39	0.65	NA	NA	14.07	13.22	000
52320		A	Cystoscopy and treatment	4.69	NA	NA	2.31	1.80	0.33	NA	NA	7.33	6.82	000
52325		A	Cystoscopy, stone removal	6.15	NA	NA	2.95	2.33	0.44	NA	NA	9.54	8.92	000
52327		A	Cystoscopy, inject material	5.18	18.36	28.52	2.43	1.97	0.37	23.91	34.07	7.98	7.52	000
52330		A	Cystoscopy and treatment	5.03	21.07	34.47	2.46	1.94	0.36	26.46	39.86	7.85	7.33	000
52332		A	Cystoscopy and treatment	2.83	4.44	5.43	1.55	1.18	0.21	7.48	8.47	4.59	4.22	000
52334		A	Create passage to kidney	4.82	NA	NA	2.42	1.91	0.35	NA	NA	7.59	7.08	000
52341		A	Cysto w/ureter stricture tx	5.99	NA	NA	3.14	2.45	0.43	NA	NA	9.56	8.87	000
52342		A	Cysto w/up stricture tx	6.49	NA	NA	3.36	2.60	0.46	NA	NA	10.31	9.55	000
52343		A	Cysto w/renal stricture tx	7.19	NA	NA	3.65	2.86	0.51	NA	NA	11.35	10.56	000
52344		A	Cysto/uretero, stricture tx	7.69	NA	NA	4.03	3.11	0.55	NA	NA	12.27	11.35	000
52345		A	Cysto/uretero w/up stricture	8.19	NA	NA	4.25	3.28	0.58	NA	NA	13.02	12.05	000
52346		A	Cystouretero w/renal strict	9.22	NA	NA	4.66	3.63	0.65	NA	NA	14.53	13.50	000
52351		A	Cystouretero & or pyeloscope	5.85	NA	NA	3.09	2.39	0.41	NA	NA	9.35	8.65	000
52352		A	Cystouretero w/stone remove	6.87	NA	NA	3.63	2.79	0.49	NA	NA	10.99	10.15	000
52353		A	Cystouretero w/lithotripsy	7.96	NA	NA	4.09	3.17	0.57	NA	NA	12.62	11.70	000
52354		A	Cystouretero w/biopsy	7.33	NA	NA	3.82	2.97	0.52	NA	NA	11.67	10.82	000
52355		A	Cystouretero w/excise tumor	8.81	NA	NA	4.43	3.47	0.63	NA	NA	13.87	12.91	000
52400		A	Cystouretero w/congen repr	10.04	NA	NA	5.64	4.22	0.68	NA	NA	16.36	14.94	090
52402		A	Cystourethro cut ejacul duct	5.27	NA	NA	2.27	1.84	0.40	NA	NA	7.94	7.51	000
52450		A	Incision of prostate	7.63	NA	NA	5.71	4.19	0.54	NA	NA	13.88	12.36	090
52500		A	Revision of bladder neck	9.33	NA	NA	6.42	4.55	0.60	NA	NA	16.35	14.48	090
52510		A	Dilation prostatic urethra	7.45	NA	NA	5.09	3.61	0.48	NA	NA	13.02	11.54	090
52601		A	Prostatectomy (TURP)	15.07	NA	NA	8.66	6.00	0.87	NA	NA	24.60	21.94	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
52606		A	Control postop bleeding	8.80	NA	NA	5.73	4.10	0.57	NA	NA	15.10	13.47	090
52612		A	Prostatectomy, first stage	9.01	NA	NA	6.11	4.33	0.56	NA	NA	15.68	13.90	090
52614		A	Prostatectomy, second stage	7.75	NA	NA	5.60	3.91	0.48	NA	NA	13.83	12.14	090
52620		A	Remove residual prostate	7.15	NA	NA	4.77	3.44	0.47	NA	NA	12.39	11.06	090
52630		A	Remove prostate regrowth	7.61	NA	NA	4.99	3.65	0.51	NA	NA	13.11	11.77	090
52640		A	Relieve bladder contracture	6.85	NA	NA	4.58	3.37	0.47	NA	NA	11.90	10.69	090
52647		A	Laser surgery of prostate	11.09	41.57	66.01	7.17	5.20	0.73	53.39	77.83	18.99	17.02	090
52648		A	Laser surgery of prostate	11.94	41.88	66.08	7.51	5.48	0.79	54.61	78.81	20.24	18.21	090
52700		A	Drainage of prostate abscess	7.35	NA	NA	5.14	3.68	0.48	NA	NA	12.97	11.51	090
53000		A	Incision of urethra	2.28	NA	NA	1.86	1.62	0.16	NA	NA	4.30	4.06	010
53010		A	Incision of urethra	4.31	NA	NA	3.90	3.17	0.24	NA	NA	8.45	7.72	090
53020		A	Incision of urethra	1.77	1.95	2.75	0.99	0.75	0.13	3.85	4.65	2.89	2.65	000
53025		A	Incision of urethra	1.13	1.74	3.24	0.69	0.56	0.08	2.95	4.45	1.90	1.77	000
53040		A	Drainage of urethra abscess	6.45	NA	NA	4.58	3.73	0.45	NA	NA	11.48	10.63	090
53060		A	Drainage of urethra abscess	2.63	1.99	2.07	1.46	1.39	0.28	4.90	4.98	4.37	4.30	010
53080		A	Drainage of urinary leakage	6.78	NA	NA	5.05	5.74	0.52	NA	NA	12.35	13.04	090
53085		A	Drainage of urinary leakage	10.99	NA	NA	4.50	6.69	0.92	NA	NA	16.41	18.60	090
53200		A	Biopsy of urethra	2.59	1.75	1.43	1.34	1.07	0.20	4.54	4.22	4.13	3.86	000
53210		A	Removal of urethra	13.53	NA	NA	8.00	6.39	0.89	NA	NA	22.42	20.81	090
53215		A	Removal of urethra	16.66	NA	NA	9.49	7.35	1.10	NA	NA	27.25	25.11	090
53220		A	Treatment of urethra lesion	7.49	NA	NA	5.16	4.08	0.49	NA	NA	13.14	12.06	090
53230		A	Removal of urethra lesion	10.25	NA	NA	6.67	5.21	0.73	NA	NA	17.65	16.19	090
53235		A	Removal of urethra lesion	10.80	NA	NA	7.17	5.48	0.72	NA	NA	18.69	17.00	090
53240		A	Surgery for urethra pouch	6.94	NA	NA	4.90	3.87	0.52	NA	NA	12.36	11.33	090
53250		A	Removal of urethra gland	6.38	NA	NA	4.85	3.69	0.49	NA	NA	11.72	10.56	090
53260		A	Treatment of urethra lesion	2.98	2.52	2.32	1.89	1.54	0.25	5.75	5.55	5.12	4.77	010
53265		A	Treatment of urethra lesion	3.12	3.05	2.80	2.07	1.58	0.24	6.41	6.16	5.43	4.94	010
53270		A	Removal of urethra gland	3.09	2.31	2.24	1.72	1.59	0.30	5.70	5.63	5.11	4.98	010
53275		A	Repair of urethra defect	4.52	NA	NA	2.86	2.41	0.32	NA	NA	7.70	7.25	010
53400		A	Revise urethra, stage 1	13.92	NA	NA	8.45	6.64	0.98	NA	NA	23.35	21.54	090
53405		A	Revise urethra, stage 2	15.45	NA	NA	9.23	7.06	1.10	NA	NA	25.78	23.61	090
53410		A	Reconstruction of urethra	17.47	NA	NA	10.13	7.84	1.16	NA	NA	28.76	26.47	090
53415		A	Reconstruction of urethra	20.49	NA	NA	11.33	8.35	1.37	NA	NA	33.19	30.21	090
53420		A	Reconstruct urethra, stage 1	14.98	NA	NA	6.53	6.36	0.96	NA	NA	22.47	22.30	090
53425		A	Reconstruct urethra, stage 2	16.88	NA	NA	9.59	7.57	1.13	NA	NA	27.60	25.58	090
53430		A	Reconstruction of urethra	17.24	NA	NA	8.90	7.48	1.15	NA	NA	27.29	25.87	090
53431		A	Reconstruct urethra/bladder	20.97	NA	NA	11.37	8.90	1.41	NA	NA	33.75	31.28	090
53440		A	Male sling procedure	15.33	NA	NA	9.58	6.89	0.96	NA	NA	25.87	23.18	090
53442		A	Remove/revise male sling	13.28	NA	NA	8.73	6.27	0.82	NA	NA	22.83	20.37	090
53444		A	Insert tandem cuff	14.00	NA	NA	8.32	6.50	0.94	NA	NA	23.26	21.44	090
53445		A	Insert uro/ves nck sphincter	15.15	NA	NA	9.53	7.71	0.99	NA	NA	25.67	23.85	090
53446		A	Remove uro sphincter	10.83	NA	NA	7.30	5.75	0.72	NA	NA	18.85	17.30	090
53447		A	Remove/replace ur sphincter	14.09	NA	NA	8.73	7.01	0.95	NA	NA	23.77	22.05	090
53448		A	Remov/replc ur sphinctr comp	23.20	NA	NA	12.90	10.03	1.50	NA	NA	37.60	34.73	090
53449		A	Repair uro sphincter	10.37	NA	NA	6.90	5.27	0.68	NA	NA	17.95	16.32	090
53450		A	Revision of urethra	6.63	NA	NA	4.91	3.70	0.43	NA	NA	11.97	10.76	090
53460		A	Revision of urethra	7.61	NA	NA	5.31	4.10	0.50	NA	NA	13.42	12.21	090
53500		A	Urethrlys, transvag w/ scope	12.81	NA	NA	7.64	6.58	0.90	NA	NA	21.35	20.29	090
53502		A	Repair of urethra injury	8.12	NA	NA	5.16	4.28	0.62	NA	NA	13.90	13.02	090
53505		A	Repair of urethra injury	8.12	NA	NA	5.59	4.30	0.54	NA	NA	14.25	12.96	090
53510		A	Repair of urethra injury	10.77	NA	NA	6.97	5.62	0.74	NA	NA	18.48	17.13	090
53515		A	Repair of urethra injury	14.03	NA	NA	8.09	6.48	1.05	NA	NA	23.17	21.56	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
53520		A	Repair of urethra defect	9.29	NA	NA	6.34	4.95	0.61	NA	NA	16.24	14.85	090
53600		A	Dilate urethra stricture	1.21	1.19	1.15	0.59	0.47	0.09	2.49	2.45	1.89	1.77	000
53601		A	Dilate urethra stricture	0.98	1.41	1.31	0.54	0.41	0.07	2.46	2.36	1.59	1.46	000
53605		A	Dilate urethra stricture	1.28	NA	NA	0.53	0.44	0.09	NA	NA	1.90	1.81	000
53620		A	Dilate urethra stricture	1.62	1.76	1.94	0.87	0.66	0.11	3.49	3.67	2.60	2.39	000
53621		A	Dilate urethra stricture	1.35	1.87	2.03	0.70	0.54	0.10	3.32	3.48	2.15	1.99	000
53660		A	Dilation of urethra	0.71	1.35	1.32	0.47	0.35	0.05	2.11	2.08	1.23	1.11	000
53661		A	Dilation of urethra	0.72	1.34	1.31	0.43	0.33	0.05	2.11	2.08	1.20	1.10	000
53665		A	Dilation of urethra	0.76	NA	NA	0.27	0.26	0.06	NA	NA	1.09	1.08	000
53850		A	Prostatic microwave thermotx	9.94	50.76	83.44	6.12	4.49	0.67	61.37	94.05	16.73	15.10	090
53852		A	Prostatic rf thermotx	10.62	47.85	78.74	6.94	5.02	0.70	59.17	90.06	18.26	16.34	090
53853		A	Prostatic water thermother	5.48	30.02	49.13	4.52	3.28	0.37	35.87	54.98	10.37	9.13	090
54000		A	Slitting of prepuce	1.54	2.79	2.89	1.53	1.08	0.11	4.44	4.54	3.18	2.73	010
54001		A	Slitting of prepuce	2.19	3.14	3.18	1.72	1.26	0.15	5.48	5.52	4.06	3.60	010
54015		A	Drain penis lesion	5.31	NA	NA	3.30	2.75	0.38	NA	NA	8.99	8.44	010
54050		A	Destruction, penis lesion(s)	1.24	2.07	1.76	1.38	1.12	0.08	3.39	3.08	2.70	2.44	010
54055		A	Destruction, penis lesion(s)	1.22	2.01	1.68	1.26	0.92	0.08	3.31	2.98	2.56	2.22	010
54056		A	Cryosurgery, penis lesion(s)	1.24	2.33	1.85	1.50	1.22	0.06	3.63	3.15	2.80	2.52	010
54057		A	Laser surg, penis lesion(s)	1.24	2.67	2.33	1.39	0.97	0.09	4.00	3.66	2.72	2.30	010
54060		A	Excision of penis lesion(s)	1.93	3.17	3.13	1.68	1.22	0.13	5.23	5.19	3.74	3.28	010
54065		A	Destruction, penis lesion(s)	2.42	3.28	2.80	1.98	1.42	0.13	5.83	5.35	4.53	3.97	010
54100		A	Biopsy of penis	1.90	3.36	2.95	1.37	0.96	0.10	5.36	4.95	3.37	2.96	000
54105		A	Biopsy of penis	3.49	4.13	4.25	2.54	2.09	0.25	7.87	7.99	6.28	5.83	010
54110		A	Treatment of penis lesion	10.73	NA	NA	6.77	5.26	0.72	NA	NA	18.22	16.71	090
54111		A	Treat penis lesion, graft	14.23	NA	NA	8.37	6.43	0.96	NA	NA	23.56	21.62	090
54112		A	Treat penis lesion, graft	16.77	NA	NA	9.70	7.53	1.11	NA	NA	27.58	25.41	090
54115		A	Treatment of penis lesion	6.76	6.01	4.79	5.16	3.89	0.43	13.20	11.98	12.35	11.08	090
54120		A	Partial removal of penis	10.82	NA	NA	7.01	5.26	0.68	NA	NA	18.51	16.76	090
54125		A	Removal of penis	14.37	NA	NA	8.48	6.50	0.95	NA	NA	23.80	21.82	090
54130		A	Remove penis & nodes	21.58	NA	NA	11.74	9.08	1.52	NA	NA	34.84	32.18	090
54135		A	Remove penis & nodes	27.91	NA	NA	14.75	11.33	1.87	NA	NA	44.53	41.11	090
54150		A	Circumcision	1.81	2.61	3.92	0.58	0.67	0.16	4.58	5.89	2.55	2.64	000
54152		A	Circumcision	2.31	NA	NA	1.76	1.34	0.19	NA	NA	4.26	3.84	010
54160		A	Circumcision	2.48	3.77	4.06	1.49	1.19	0.19	6.44	6.73	4.16	3.86	010
54161		A	Circumcision	3.27	NA	NA	2.28	1.74	0.23	NA	NA	5.78	5.24	010
54162		A	Lysis penil circumic lesion	3.25	4.12	4.53	2.32	1.66	0.21	7.58	7.99	5.78	5.12	010
54163		A	Repair of circumcision	3.25	NA	NA	2.97	2.25	0.21	NA	NA	6.43	5.71	010
54164		A	Frenulotomy of penis	2.75	NA	NA	2.72	2.06	0.18	NA	NA	5.65	4.99	010
54200		A	Treatment of penis lesion	1.06	2.07	1.87	1.34	1.06	0.08	3.21	3.01	2.48	2.20	010
54205		A	Treatment of penis lesion	8.78	NA	NA	6.47	5.14	0.56	NA	NA	15.81	14.48	090
54220		A	Treatment of penis lesion	2.42	3.42	3.74	1.41	1.07	0.17	6.01	6.33	4.00	3.66	000
54230		A	Prepare penis study	1.34	1.45	1.17	0.94	0.71	0.09	2.88	2.60	2.37	2.14	000
54231		A	Dynamic cavernosometry	2.04	1.91	1.51	1.21	0.96	0.16	4.11	3.71	3.41	3.16	000
54235		A	Penile injection	1.19	1.44	1.08	0.92	0.67	0.08	2.71	2.35	2.19	1.94	000
54240		A	Penis study	1.31	1.57	1.17	NA	NA	0.17	3.05	2.65	NA	NA	000
54240	26	A	Penis study	1.31	0.51	0.45	0.51	0.45	0.11	1.93	1.87	1.93	1.87	000
54240	TC	A	Penis study	0.00	1.06	0.72	NA	NA	0.06	1.12	0.78	NA	NA	000
54250		A	Penis study	2.22	1.28	1.00	NA	NA	0.18	3.68	3.40	NA	NA	000
54250	26	A	Penis study	2.22	0.90	0.76	0.90	0.76	0.16	3.28	3.14	3.28	3.14	000
54250	TC	A	Penis study	0.00	0.38	0.25	NA	NA	0.02	0.40	0.27	NA	NA	000
54300		A	Revision of penis	11.01	NA	NA	7.29	6.01	0.76	NA	NA	19.06	17.78	090
54304		A	Revision of penis	13.09	NA	NA	8.30	6.83	0.88	NA	NA	22.27	20.80	090

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CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
54308		A	Reconstruction of urethra	12.43	NA	NA	8.11	6.51	0.84	NA	NA	21.38	19.78	090
54312		A	Reconstruction of urethra	14.30	NA	NA	9.14	7.54	1.24	NA	NA	24.68	23.08	090
54316		A	Reconstruction of urethra	17.84	NA	NA	10.55	8.61	1.21	NA	NA	29.60	27.66	090
54318		A	Reconstruction of urethra	12.22	NA	NA	6.56	5.99	1.39	NA	NA	20.17	19.60	090
54322		A	Reconstruction of urethra	13.79	NA	NA	8.41	6.96	0.92	NA	NA	23.12	21.67	090
54324		A	Reconstruction of urethra	17.34	NA	NA	10.37	8.57	1.14	NA	NA	28.85	27.05	090
54326		A	Reconstruction of urethra	16.81	NA	NA	10.11	8.37	1.11	NA	NA	28.03	26.29	090
54328		A	Revise penis/urethra	16.68	NA	NA	10.11	7.97	0.98	NA	NA	27.77	25.63	090
54332		A	Revise penis/urethra	18.16	NA	NA	10.69	8.48	1.21	NA	NA	30.06	27.85	090
54336		A	Revise penis/urethra	21.36	NA	NA	12.42	10.84	2.20	NA	NA	35.98	34.40	090
54340		A	Secondary urethral surgery	9.52	NA	NA	6.79	5.48	0.63	NA	NA	16.94	15.63	090
54344		A	Secondary urethral surgery	16.85	NA	NA	10.18	8.37	1.54	NA	NA	28.57	26.76	090
54348		A	Secondary urethral surgery	18.11	NA	NA	6.36	7.86	1.23	NA	NA	25.70	27.20	090
54352		A	Reconstruct urethra/penis	25.87	NA	NA	14.32	11.98	2.24	NA	NA	42.43	40.09	090
54360		A	Penis plastic surgery	12.59	NA	NA	8.07	6.55	0.84	NA	NA	21.50	19.98	090
54380		A	Repair penis	13.97	NA	NA	5.70	6.39	0.93	NA	NA	20.60	21.29	090
54385		A	Repair penis	16.30	NA	NA	8.77	8.40	0.86	NA	NA	25.93	25.56	090
54390		A	Repair penis and bladder	22.51	NA	NA	7.50	8.95	1.54	NA	NA	31.55	33.00	090
54400		A	Insert semi-rigid prosthesis	9.04	NA	NA	5.97	4.76	0.64	NA	NA	15.65	14.44	090
54401		A	Insert self-contd prosthesis	10.26	NA	NA	8.50	6.43	0.73	NA	NA	19.49	17.42	090
54405		A	Insert multi-comp penis pros	14.33	NA	NA	8.48	6.57	0.95	NA	NA	23.76	21.85	090
54406		A	Remove muti-comp penis pros	12.70	NA	NA	7.92	6.05	0.86	NA	NA	21.48	19.61	090
54408		A	Repair multi-comp penis pros	13.67	NA	NA	8.55	6.44	0.90	NA	NA	23.12	21.01	090
54410		A	Remove/replace penis prosth	16.42	NA	NA	9.73	7.41	1.10	NA	NA	27.25	24.93	090
54411		A	Remov/replc penis pros, comp	18.06	NA	NA	10.80	7.99	1.13	NA	NA	29.99	27.18	090
54415		A	Remove self-contd penis pros	8.69	NA	NA	6.23	4.71	0.58	NA	NA	15.50	13.98	090
54416		A	Remv/repl penis contain pros	11.79	NA	NA	8.18	6.08	0.77	NA	NA	20.74	18.64	090
54417		A	Remv/replc penis pros, compl	15.88	NA	NA	9.26	6.95	1.00	NA	NA	26.14	23.83	090
54420		A	Revision of penis	12.20	NA	NA	7.78	6.13	0.81	NA	NA	20.79	19.14	090
54430		A	Revision of penis	10.87	NA	NA	7.18	5.63	0.72	NA	NA	18.77	17.22	090
54435		A	Revision of penis	6.67	NA	NA	5.11	3.99	0.43	NA	NA	12.21	11.09	090
54450		A	Preputial stretching	1.12	0.88	0.93	0.50	0.46	0.08	2.08	2.13	1.70	1.66	000
54500		A	Biopsy of testis	1.31	0.64	0.62	0.82	0.63	0.10	2.05	2.03	2.23	2.04	000
54505		A	Biopsy of testis	3.45	NA	NA	2.47	2.06	0.27	NA	NA	6.19	5.78	010
54512		A	Excise lesion testis	9.19	NA	NA	5.87	4.57	0.67	NA	NA	15.73	14.43	090
54520		A	Removal of testis	5.22	NA	NA	3.81	3.05	0.50	NA	NA	9.53	8.77	090
54522		A	Orchiectomy, partial	10.11	NA	NA	5.89	5.13	0.89	NA	NA	16.89	16.13	090
54530		A	Removal of testis	9.25	NA	NA	6.26	4.75	0.66	NA	NA	16.17	14.66	090
54535		A	Extensive testis surgery	13.00	NA	NA	7.77	6.11	0.95	NA	NA	21.72	20.06	090
54550		A	Exploration for testis	8.27	NA	NA	5.47	4.23	0.59	NA	NA	14.33	13.09	090
54560		A	Exploration for testis	11.91	NA	NA	6.56	5.51	0.90	NA	NA	19.37	18.32	090
54600		A	Reduce testis torsion	7.50	NA	NA	5.29	3.99	0.51	NA	NA	13.30	12.00	090
54620		A	Suspension of testis	5.14	NA	NA	3.37	2.67	0.37	NA	NA	8.88	8.18	010
54640		A	Suspension of testis	7.53	NA	NA	5.59	4.20	0.62	NA	NA	13.74	12.35	090
54650		A	Orchiopexy (Fowler-Stephens)	12.18	NA	NA	7.95	6.05	1.16	NA	NA	21.29	19.39	090
54660		A	Revision of testis	5.60	NA	NA	4.52	3.38	0.44	NA	NA	10.56	9.42	090
54670		A	Repair testis injury	6.52	NA	NA	4.91	3.88	0.47	NA	NA	11.90	10.87	090
54680		A	Relocation of testis(es)	13.85	NA	NA	7.87	6.59	1.16	NA	NA	22.88	21.60	090
54690		A	Laparoscopy, orchiectomy	11.56	NA	NA	6.31	5.28	1.02	NA	NA	18.89	17.86	090
54692		A	Laparoscopy, orchiopexy	13.60	NA	NA	7.89	6.05	1.30	NA	NA	22.79	20.95	090
54700		A	Drainage of scrotum	3.42	NA	NA	2.46	2.07	0.28	NA	NA	6.16	5.77	010

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
54800		A	Biopsy of epididymis	2.33	0.87	0.92	1.01	0.93	0.23	3.43	3.48	3.57	3.49	000
54820		A	Exploration of epididymis	5.63	NA	NA	4.38	3.30	0.40	NA	NA	10.41	9.33	090
54830		A	Remove epididymis lesion	5.87	NA	NA	4.56	3.41	0.41	NA	NA	10.84	9.69	090
54840		A	Remove epididymis lesion	5.19	NA	NA	3.90	3.06	0.37	NA	NA	9.46	8.62	090
54860		A	Removal of epididymis	6.81	NA	NA	5.02	3.74	0.45	NA	NA	12.28	11.00	090
54861		A	Removal of epididymis	9.51	NA	NA	6.46	4.85	0.63	NA	NA	16.60	14.99	090
54900		A	Fusion of spermatic ducts	13.99	NA	NA	5.12	5.63	0.93	NA	NA	20.04	20.55	090
54901		A	Fusion of spermatic ducts	18.84	NA	NA	6.43	7.26	1.82	NA	NA	27.09	27.92	090
55000		A	Drainage of hydrocele	1.43	1.90	2.03	0.94	0.72	0.11	3.44	3.57	2.48	2.26	000
55040		A	Removal of hydrocele	5.35	NA	NA	4.04	3.19	0.43	NA	NA	9.82	8.97	090
55041		A	Removal of hydroceles	8.35	NA	NA	5.85	4.44	0.60	NA	NA	14.80	13.39	090
55060		A	Repair of hydrocele	6.01	NA	NA	4.54	3.45	0.46	NA	NA	11.01	9.92	090
55100		A	Drainage of scrotum abscess	2.38	3.58	3.66	2.16	1.71	0.17	6.13	6.21	4.71	4.26	010
55110		A	Explore scrotum	6.19	NA	NA	4.63	3.51	0.43	NA	NA	11.25	10.13	090
55120		A	Removal of scrotum lesion	5.58	NA	NA	4.41	3.32	0.39	NA	NA	10.38	9.29	090
55150		A	Removal of scrotum	7.95	NA	NA	5.62	4.29	0.56	NA	NA	14.13	12.80	090
55175		A	Revision of scrotum	5.73	NA	NA	4.49	3.38	0.37	NA	NA	10.59	9.48	090
55180		A	Revision of scrotum	11.57	NA	NA	7.47	5.90	0.90	NA	NA	19.94	18.37	090
55200		A	Incision of sperm duct	4.48	8.46	11.38	3.47	2.65	0.33	13.27	16.19	8.28	7.46	090
55250		A	Removal of sperm duct(s)	3.29	7.88	10.60	3.06	2.43	0.25	11.42	14.14	6.60	5.97	090
55300		A	Prepare, sperm duct x-ray	3.50	NA	NA	1.83	1.44	0.25	NA	NA	5.58	5.19	000
55400		A	Repair of sperm duct	8.48	NA	NA	5.66	4.46	0.64	NA	NA	14.78	13.58	090
55450		A	Ligation of sperm duct	4.36	6.15	6.80	2.94	2.14	0.29	10.80	11.45	7.59	6.79	010
55500		A	Removal of hydrocele	6.08	NA	NA	4.29	3.39	0.55	NA	NA	10.92	10.02	090
55520		A	Removal of sperm cord lesion	6.52	NA	NA	3.80	3.39	0.75	NA	NA	11.07	10.66	090
55530		A	Revise spermatic cord veins	5.65	NA	NA	4.23	3.32	0.45	NA	NA	10.33	9.42	090
55535		A	Revise spermatic cord veins	7.05	NA	NA	4.96	3.79	0.47	NA	NA	12.48	11.31	090
55540		A	Revise hernia & sperm veins	8.16	NA	NA	4.25	3.91	0.94	NA	NA	13.35	13.01	090
55550		A	Laparo ligate spermatic vein	7.06	NA	NA	4.66	3.64	0.57	NA	NA	12.29	11.27	090
55600		A	Incise sperm duct pouch	6.87	NA	NA	5.05	3.76	0.62	NA	NA	12.54	11.25	090
55605		A	Incise sperm duct pouch	8.57	NA	NA	4.95	4.46	0.64	NA	NA	14.16	13.67	090
55650		A	Remove sperm duct pouch	12.46	NA	NA	7.46	5.83	0.92	NA	NA	20.84	19.21	090
55680		A	Remove sperm pouch lesion	5.55	NA	NA	3.93	3.21	0.47	NA	NA	9.95	9.23	090
55700		A	Biopsy of prostate	2.58	3.84	4.11	1.39	0.83	0.11	6.53	6.80	4.08	3.52	000
55705		A	Biopsy of prostate	4.56	NA	NA	2.97	2.47	0.32	NA	NA	7.85	7.35	010
55720		A	Drainage of prostate abscess	7.63	NA	NA	4.98	4.11	0.95	NA	NA	13.56	12.69	090
55725		A	Drainage of prostate abscess	9.84	NA	NA	6.67	5.04	0.70	NA	NA	17.21	15.58	090
55801		A	Removal of prostate	19.54	NA	NA	10.98	8.46	1.34	NA	NA	31.86	29.34	090
55810		A	Extensive prostate surgery	24.08	NA	NA	12.91	9.94	1.60	NA	NA	38.59	35.62	090
55812		A	Extensive prostate surgery	29.61	NA	NA	15.54	12.13	2.04	NA	NA	47.19	43.78	090
55815		A	Extensive prostate surgery	32.67	NA	NA	17.02	13.18	2.16	NA	NA	51.85	48.01	090
55821		A	Removal of prostate	15.57	NA	NA	9.06	6.92	1.01	NA	NA	25.64	23.50	090
55831		A	Removal of prostate	17.00	NA	NA	9.67	7.41	1.10	NA	NA	27.77	25.51	090
55840		A	Extensive prostate surgery	24.37	NA	NA	13.24	10.28	1.61	NA	NA	39.22	36.26	090
55842		A	Extensive prostate surgery	26.23	NA	NA	14.08	10.91	1.72	NA	NA	42.03	38.86	090
55845		A	Extensive prostate surgery	30.46	NA	NA	15.54	12.09	2.02	NA	NA	48.02	44.57	090
55859		A	Percut/needle insert, pros	13.25	NA	NA	8.12	6.42	0.89	NA	NA	22.26	20.56	090
55860		A	Surgical exposure, prostate	15.65	NA	NA	9.01	7.06	1.02	NA	NA	25.68	23.73	090
55862		A	Extensive prostate surgery	19.83	NA	NA	11.17	8.68	1.49	NA	NA	32.49	30.00	090
55865		A	Extensive prostate surgery	24.31	NA	NA	13.36	10.29	1.63	NA	NA	39.30	36.23	090
55866		A	Laparo radical prostatectomy	32.17	NA	NA	16.64	12.96	2.16	NA	NA	50.97	47.29	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
55870		A	Electroejaculation	2.58	2.53	1.78	1.49	1.18	0.16	5.27	4.52	4.23	3.92	000
55873		A	Cryoablate prostate	20.19	NA	NA	11.73	9.65	1.38	NA	NA	33.30	31.22	090
56405		A	I & D of vulva/perineum	1.44	1.16	1.29	1.14	1.14	0.17	2.77	2.90	2.75	2.75	010
56420		A	Drainage of gland abscess	1.39	1.50	2.09	0.76	0.97	0.16	3.05	3.64	2.31	2.52	010
56440		A	Surgery for vulva lesion	2.84	NA	NA	1.51	1.66	0.34	NA	NA	4.69	4.84	010
56441		A	Lysis of labial lesion(s)	1.97	1.72	1.80	1.56	1.45	0.20	3.89	3.97	3.73	3.62	010
56501		A	Destroy, vulva lesions, sim	1.53	1.62	1.75	1.21	1.23	0.18	3.33	3.46	2.92	2.94	010
56515		A	Destroy vulva lesion/s compl	3.01	2.34	2.50	1.70	1.79	0.33	5.68	5.84	5.04	5.13	010
56605		A	Biopsy of vulva/perineum	1.10	0.89	1.03	0.34	0.43	0.13	2.12	2.26	1.57	1.66	000
56606		A	Biopsy of vulva/perineum	0.55	0.36	0.46	0.15	0.20	0.07	0.98	1.08	0.77	0.82	ZZZ
56620		A	Partial removal of vulva	8.38	NA	NA	4.28	4.67	0.90	NA	NA	13.56	13.95	090
56625		A	Complete removal of vulva	9.49	NA	NA	4.68	5.17	1.02	NA	NA	15.19	15.68	090
56630		A	Extensive vulva surgery	14.61	NA	NA	6.07	6.66	1.49	NA	NA	22.17	22.76	090
56631		A	Extensive vulva surgery	18.75	NA	NA	7.60	8.52	1.95	NA	NA	28.30	29.22	090
56632		A	Extensive vulva surgery	21.51	NA	NA	9.02	9.41	2.38	NA	NA	32.91	33.30	090
56633		A	Extensive vulva surgery	19.41	NA	NA	7.54	8.34	1.97	NA	NA	28.92	29.72	090
56634		A	Extensive vulva surgery	20.42	NA	NA	8.03	9.10	2.16	NA	NA	30.61	31.68	090
56637		A	Extensive vulva surgery	24.51	NA	NA	9.15	10.61	2.60	NA	NA	36.26	37.72	090
56640		A	Extensive vulva surgery	24.59	NA	NA	9.02	10.24	2.88	NA	NA	36.49	37.71	090
56700		A	Partial removal of hymen	2.77	NA	NA	1.75	1.82	0.30	NA	NA	4.82	4.89	010
56720		A	Incision of hymen	0.68	NA	NA	0.51	0.51	0.08	NA	NA	1.27	1.27	000
56740		A	Remove vagina gland lesion	4.81	NA	NA	2.28	2.50	0.56	NA	NA	7.65	7.87	010
56800		A	Repair of vagina	3.88	NA	NA	1.97	2.14	0.44	NA	NA	6.29	6.46	010
56805		A	Repair clitoris	19.69	NA	NA	11.06	9.85	2.14	NA	NA	32.89	31.68	090
56810		A	Repair of perineum	4.24	NA	NA	2.03	2.23	0.49	NA	NA	6.76	6.96	010
56820		A	Exam of vulva w/scope	1.50	1.18	1.28	0.52	0.62	0.18	2.86	2.96	2.20	2.30	000
56821		A	Exam/biopsy of vulva w/scope	2.05	1.52	1.70	0.67	0.85	0.25	3.82	4.00	2.97	3.15	000
57000		A	Exploration of vagina	2.97	NA	NA	1.70	1.72	0.31	NA	NA	4.98	5.00	010
57010		A	Drainage of pelvic abscess	6.70	NA	NA	3.80	3.81	0.71	NA	NA	11.21	11.22	090
57020		A	Drainage of pelvic fluid	1.50	0.75	0.89	0.43	0.55	0.18	2.43	2.57	2.11	2.23	000
57022		A	I & d vaginal hematoma, pp	2.68	NA	NA	1.42	1.47	0.26	NA	NA	4.36	4.41	010
57023		A	I & d vag hematoma, non-ob	5.11	NA	NA	2.36	2.53	0.58	NA	NA	8.05	8.22	010
57061		A	Destroy vag lesions, simple	1.25	1.50	1.61	1.10	1.12	0.15	2.90	3.01	2.50	2.52	010
57065		A	Destroy vag lesions, complex	2.61	1.99	2.22	1.47	1.62	0.31	4.91	5.14	4.39	4.54	010
57100		A	Biopsy of vagina	1.20	0.92	1.04	0.36	0.45	0.14	2.26	2.38	1.70	1.79	000
57105		A	Biopsy of vagina	1.69	1.57	1.74	1.32	1.40	0.20	3.46	3.63	3.21	3.29	010
57106		A	Remove vagina wall, partial	7.29	NA	NA	4.15	4.18	0.73	NA	NA	12.17	12.20	090
57107		A	Remove vagina tissue, part	24.37	NA	NA	8.88	10.09	2.71	NA	NA	35.96	37.17	090
57109		A	Vaginectomy partial w/nodes	28.19	NA	NA	10.14	10.99	3.21	NA	NA	41.54	42.39	090
57110		A	Remove vagina wall, complete	15.34	NA	NA	6.11	7.00	1.73	NA	NA	23.18	24.07	090
57111		A	Remove vagina tissue, compl	28.19	NA	NA	9.99	11.99	3.17	NA	NA	41.35	43.35	090
57112		A	Vaginectomy w/nodes, compl	30.31	NA	NA	11.45	11.96	3.07	NA	NA	44.83	45.34	090
57120		A	Closure of vagina	8.14	NA	NA	4.12	4.49	0.89	NA	NA	13.15	13.52	090
57130		A	Remove vagina lesion	2.43	1.96	2.11	1.47	1.52	0.29	4.68	4.83	4.19	4.24	010
57135		A	Remove vagina lesion	2.67	2.01	2.21	1.51	1.62	0.31	4.99	5.19	4.49	4.60	010
57150		A	Treat vagina infection	0.55	0.57	0.97	0.15	0.20	0.07	1.19	1.59	0.77	0.82	000
57155		A	Insert uteri tandems/ovoids	6.75	NA	NA	3.14	4.21	0.43	NA	NA	10.32	11.39	090
57160		A	Insert pessary/other device	0.89	1.04	1.02	0.25	0.32	0.10	2.03	2.01	1.24	1.31	000
57170		A	Fitting of diaphragm/cap	0.91	2.68	1.78	0.25	0.31	0.11	3.70	2.80	1.27	1.33	000
57180		A	Treat vaginal bleeding	1.58	1.83	2.09	0.91	1.17	0.19	3.60	3.86	2.68	2.94	010
57200		A	Repair of vagina	4.30	NA	NA	2.90	2.90	0.46	NA	NA	7.66	7.66	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
57210		A	Repair vagina/perineum	5.59	NA	NA	3.20	3.38	0.62	NA	NA	9.41	9.59	090
57220		A	Revision of urethra	4.73	NA	NA	2.95	3.07	0.51	NA	NA	8.19	8.31	090
57230		A	Repair of urethral lesion	6.18	NA	NA	3.76	3.50	0.54	NA	NA	10.48	10.22	090
57240		A	Repair bladder & vagina	11.38	NA	NA	5.55	4.25	0.62	NA	NA	17.55	16.25	090
57250		A	Repair rectum & vagina	11.38	NA	NA	4.82	3.89	0.65	NA	NA	16.85	15.92	090
57260		A	Repair of vagina	14.32	NA	NA	5.82	5.09	0.97	NA	NA	21.11	20.38	090
57265		A	Extensive repair of vagina	15.82	NA	NA	6.29	6.11	1.32	NA	NA	23.43	23.25	090
57267		A	Insert mesh/pelvic flr addon	4.88	NA	NA	1.50	1.86	0.64	NA	NA	7.02	7.38	ZZZ
57268		A	Repair of bowel bulge	7.43	NA	NA	3.95	4.14	0.79	NA	NA	12.17	12.36	090
57270		A	Repair of bowel pouch	13.53	NA	NA	5.60	6.10	1.42	NA	NA	20.55	21.05	090
57280		A	Suspension of vagina	16.58	NA	NA	6.94	7.27	1.67	NA	NA	25.19	25.52	090
57282		A	Colpopexy, extraperitoneal	7.78	NA	NA	4.35	4.47	1.02	NA	NA	13.15	13.27	090
57283		A	Colpopexy, intraperitoneal	11.54	NA	NA	5.15	5.74	1.02	NA	NA	17.71	18.30	090
57284		A	Repair paravaginal defect	13.43	NA	NA	6.69	7.04	1.41	NA	NA	21.53	21.88	090
57287		A	Revise/remove sling repair	11.43	NA	NA	6.54	5.75	0.90	NA	NA	18.87	18.08	090
57288		A	Repair bladder defect	13.95	NA	NA	7.12	6.22	1.12	NA	NA	22.19	21.29	090
57289		A	Repair bladder & vagina	12.63	NA	NA	6.19	6.09	1.21	NA	NA	20.03	19.93	090
57291		A	Construction of vagina	8.50	NA	NA	4.23	4.76	0.93	NA	NA	13.66	14.19	090
57292		A	Construct vagina with graft	13.87	NA	NA	5.90	6.69	1.58	NA	NA	21.35	22.14	090
57295		A	Change vaginal graft	7.70	NA	NA	3.65	4.24	0.91	NA	NA	12.26	12.85	090
57300		A	Repair rectum-vagina fistula	8.52	NA	NA	4.40	4.32	0.87	NA	NA	13.79	13.71	090
57305		A	Repair rectum-vagina fistula	15.18	NA	NA	6.11	6.24	1.72	NA	NA	23.01	23.14	090
57307		A	Fistula repair & colostomy	16.96	NA	NA	6.77	6.95	2.01	NA	NA	25.74	25.92	090
57308		A	Fistula repair, transperine	10.42	NA	NA	4.76	5.02	1.14	NA	NA	16.32	16.58	090
57310		A	Repair urethrovaginal lesion	7.51	NA	NA	5.16	4.17	0.54	NA	NA	13.21	12.22	090
57311		A	Repair urethrovaginal lesion	8.77	NA	NA	5.22	4.40	0.65	NA	NA	14.64	13.82	090
57320		A	Repair bladder-vagina lesion	8.74	NA	NA	5.40	4.63	0.69	NA	NA	14.83	14.06	090
57330		A	Repair bladder-vagina lesion	13.07	NA	NA	7.29	6.11	1.06	NA	NA	21.42	20.24	090
57335		A	Repair vagina	19.81	NA	NA	8.95	9.03	1.91	NA	NA	30.67	30.75	090
57400		A	Dilation of vagina	2.27	NA	NA	0.97	1.08	0.26	NA	NA	3.50	3.61	000
57410		A	Pelvic examination	1.75	1.39	1.86	0.92	0.90	0.18	3.32	3.79	2.85	2.83	000
57415		A	Remove vaginal foreign body	2.42	NA	NA	1.50	1.44	0.24	NA	NA	4.16	4.10	010
57420		A	Exam of vagina w/scope	1.60	1.22	1.32	0.55	0.64	0.19	3.01	3.11	2.34	2.43	000
57421		A	Exam/biopsy of vag w/scope	2.20	1.58	1.78	0.71	0.90	0.27	4.05	4.25	3.18	3.37	000
57425		A	Laparoscopy, surg, colpopexy	16.89	NA	NA	6.77	6.68	1.75	NA	NA	25.41	25.32	090
57452		A	Exam of cervix w/scope	1.50	1.17	1.25	0.73	0.75	0.18	2.85	2.93	2.41	2.43	000
57454		A	Bx/curett of cervix w/scope	2.33	1.38	1.58	0.94	1.10	0.28	3.99	4.19	3.55	3.71	000
57455		A	Biopsy of cervix w/scope	1.99	1.48	1.66	0.65	0.82	0.24	3.71	3.89	2.88	3.05	000
57456		A	Endocerv curettage w/scope	1.85	1.44	1.60	0.62	0.77	0.22	3.51	3.67	2.69	2.84	000
57460		A	Bx of cervix w/scope, leep	2.83	4.27	5.46	1.08	1.31	0.34	7.44	8.63	4.25	4.48	000
57461		A	Conz of cervix w/scope, leep	3.43	4.57	5.73	1.05	1.37	0.41	8.41	9.57	4.89	5.21	000
57500		A	Biopsy of cervix	1.20	2.00	2.41	0.64	0.63	0.12	3.32	3.73	1.96	1.95	000
57505		A	Endocervical curettage	1.14	1.30	1.42	1.05	1.09	0.14	2.58	2.70	2.33	2.37	010
57510		A	Cauterization of cervix	1.90	1.29	1.49	0.89	1.00	0.23	3.42	3.62	3.02	3.13	010
57511		A	Cryocautery of cervix	1.90	1.58	1.77	1.25	1.34	0.23	3.71	3.90	3.38	3.47	010
57513		A	Laser surgery of cervix	1.90	1.55	1.68	1.26	1.37	0.23	3.68	3.81	3.39	3.50	010
57520		A	Conization of cervix	4.03	3.33	3.79	2.47	2.78	0.49	7.85	8.31	6.99	7.30	090
57522		A	Conization of cervix	3.60	2.74	3.06	2.23	2.40	0.41	6.75	7.07	6.24	6.41	090
57530		A	Removal of cervix	5.15	NA	NA	3.06	3.31	0.58	NA	NA	8.79	9.04	090
57531		A	Removal of cervix, radical	29.71	NA	NA	10.39	12.50	3.34	NA	NA	43.44	45.55	090
57540		A	Removal of residual cervix	13.15	NA	NA	5.49	6.06	1.49	NA	NA	20.13	20.70	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
57545		A	Remove cervix/repair pelvis	13.96	NA	NA	6.16	6.56	1.52	NA	NA	21.64	22.04	090
57550		A	Removal of residual cervix	6.20	NA	NA	3.58	3.77	0.67	NA	NA	10.45	10.64	090
57555		A	Remove cervix/repair vagina	9.80	NA	NA	4.71	5.00	1.09	NA	NA	15.60	15.89	090
57556		A	Remove cervix, repair bowel	9.22	NA	NA	4.65	4.81	0.92	NA	NA	14.79	14.95	090
57700		A	Revision of cervix	4.16	NA	NA	3.16	3.12	0.41	NA	NA	7.73	7.69	090
57720		A	Revision of cervix	4.49	NA	NA	2.86	3.05	0.49	NA	NA	7.84	8.03	090
57800		A	Dilation of cervical canal	0.77	0.70	0.75	0.41	0.46	0.09	1.56	1.61	1.27	1.32	000
57820		A	D & c of residual cervix	1.67	1.33	1.44	1.03	1.11	0.20	3.20	3.31	2.90	2.98	010
58100		A	Biopsy of uterus lining	1.53	1.12	1.27	0.57	0.68	0.18	2.83	2.98	2.28	2.39	000
58110		A	Bx done w/colposcopy add-on	0.77	0.39	0.51	0.21	0.29	0.09	1.25	1.37	1.07	1.15	ZZZ
58120		A	Dilation and curettage	3.52	2.07	2.25	1.63	1.82	0.39	5.98	6.16	5.54	5.73	010
58140		A	Myomectomy abdom method	15.65	NA	NA	6.11	6.87	1.81	NA	NA	23.57	24.33	090
58145		A	Myomectomy vag method	8.77	NA	NA	4.18	4.65	0.97	NA	NA	13.92	14.39	090
58146		A	Myomectomy abdom complex	20.20	NA	NA	7.16	8.56	2.32	NA	NA	29.68	31.08	090
58150		A	Total hysterectomy	17.17	NA	NA	6.42	7.23	1.84	NA	NA	25.43	26.24	090
58152		A	Total hysterectomy	21.67	NA	NA	7.99	9.41	2.47	NA	NA	32.13	33.55	090
58180		A	Partial hysterectomy	16.46	NA	NA	6.22	7.16	1.64	NA	NA	24.32	25.26	090
58200		A	Extensive hysterectomy	22.96	NA	NA	7.94	9.50	2.54	NA	NA	33.44	35.00	090
58210		A	Extensive hysterectomy	30.70	NA	NA	10.43	12.53	3.37	NA	NA	44.50	46.60	090
58240		A	Removal of pelvis contents	43.13	NA	NA	15.63	17.15	4.22	NA	NA	62.98	64.50	090
58260		A	Vaginal hysterectomy	13.98	NA	NA	5.69	6.46	1.57	NA	NA	21.24	22.01	090
58262		A	Vag hyst including t/o	15.77	NA	NA	6.15	7.09	1.79	NA	NA	23.71	24.65	090
58263		A	Vag hyst w/t/o & vag repair	17.06	NA	NA	6.50	7.55	1.94	NA	NA	25.50	26.55	090
58267		A	Vag hyst w/urinary repair	18.17	NA	NA	6.88	8.01	2.06	NA	NA	27.11	28.24	090
58270		A	Vag hyst w/enterocele repair	15.16	NA	NA	5.84	6.77	1.73	NA	NA	22.73	23.66	090
58275		A	Hysterectomy/revise vagina	16.84	NA	NA	6.54	7.48	1.91	NA	NA	25.29	26.23	090
58280		A	Hysterectomy/revise vagina	18.14	NA	NA	6.90	7.93	2.06	NA	NA	27.10	28.13	090
58285		A	Extensive hysterectomy	23.26	NA	NA	7.73	9.41	2.70	NA	NA	33.69	35.37	090
58290		A	Vag hyst complex	20.13	NA	NA	7.24	8.67	2.29	NA	NA	29.66	31.09	090
58291		A	Vag hyst incl t/o, complex	21.92	NA	NA	7.66	9.34	2.52	NA	NA	32.10	33.78	090
58292		A	Vag hyst t/o & repair, compl	23.21	NA	NA	8.13	9.83	2.67	NA	NA	34.01	35.71	090
58293		A	Vag hyst w/uro repair, compl	24.19	NA	NA	8.32	10.09	2.78	NA	NA	35.29	37.06	090
58294		A	Vag hyst w/enterocele, compl	21.41	NA	NA	7.04	8.95	2.39	NA	NA	30.84	32.75	090
58300		N	Insert intrauterine device	1.01	0.62	1.22	0.23	0.34	0.12	1.75	2.35	1.36	1.47	XXX
58301		A	Remove intrauterine device	1.27	1.04	1.25	0.34	0.45	0.15	2.46	2.67	1.76	1.87	000
58321		A	Artificial insemination	0.92	0.96	1.10	0.24	0.34	0.10	1.98	2.12	1.26	1.36	000
58322		A	Artificial insemination	1.10	1.03	1.16	0.30	0.39	0.13	2.26	2.39	1.53	1.62	000
58323		A	Sperm washing	0.23	0.15	0.44	0.07	0.09	0.03	0.41	0.70	0.33	0.35	000
58340		A	Catheter for hysterography	0.88	2.17	2.92	0.57	0.63	0.09	3.14	3.89	1.54	1.60	000
58345		A	Reopen fallopian tube	4.65	NA	NA	2.06	2.35	0.41	NA	NA	7.12	7.41	010
58346		A	Insert heyman uteri capsule	7.44	NA	NA	3.38	3.79	0.56	NA	NA	11.38	11.79	090
58350		A	Reopen fallopian tube	1.01	1.32	1.45	0.86	0.91	0.12	2.45	2.58	1.99	2.04	010
58353		A	Endometr ablate, thermal	3.55	22.89	32.54	1.68	1.97	0.43	26.87	36.52	5.66	5.95	010
58356		A	Endometrial cryoablation	6.36	43.33	57.04	1.80	2.48	0.82	50.51	64.22	8.98	9.66	010
58400		A	Suspension of uterus	7.02	NA	NA	3.80	3.91	0.75	NA	NA	11.57	11.68	090
58410		A	Suspension of uterus	13.66	NA	NA	5.79	6.29	1.45	NA	NA	20.90	21.40	090
58520		A	Repair of ruptured uterus	13.34	NA	NA	5.35	5.88	1.47	NA	NA	20.16	20.69	090
58540		A	Revision of uterus	15.57	NA	NA	6.09	6.75	1.78	NA	NA	23.44	24.10	090
58545		A	Laparoscopic myomectomy	15.65	NA	NA	5.88	6.87	1.77	NA	NA	23.30	24.29	090
58546		A	Laparo-myomectomy, complex	20.20	NA	NA	7.06	8.47	2.30	NA	NA	29.56	30.97	090
58550		A	Laparo-asst vag hysterectomy	14.91	NA	NA	6.05	7.00	1.72	NA	NA	22.68	23.63	090
58552		A	Laparo-vag hyst incl t/o	16.23	NA	NA	6.33	7.61	1.72	NA	NA	24.28	25.56	090

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CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
58553		A	Laparo-vag hyst, complex	20.13	NA	NA	7.04	8.47	2.30	NA	NA	29.47	30.90	090
58554		A	Laparo-vag hyst w/t/o, compl	23.13	NA	NA	8.18	9.86	2.27	NA	NA	33.58	35.26	090
58555		A	Hysteroscopy, dx, sep proc	3.33	1.88	2.12	1.22	1.47	0.40	5.61	5.85	4.95	5.20	000
58558		A	Hysteroscopy, biopsy	4.74	NA	NA	1.63	2.04	0.57	NA	NA	6.94	7.35	000
58559		A	Hysteroscopy, lysis	6.16	NA	NA	2.01	2.56	0.74	NA	NA	8.91	9.46	000
58560		A	Hysteroscopy, resect septum	6.99	NA	NA	2.24	2.88	0.84	NA	NA	10.07	10.71	000
58561		A	Hysteroscopy, remove myoma	9.99	NA	NA	3.07	3.99	1.21	NA	NA	14.27	15.19	000
58562		A	Hysteroscopy, remove fb	5.20	NA	NA	1.73	2.20	0.63	NA	NA	7.56	8.03	000
58563		A	Hysteroscopy, ablation	6.16	37.31	51.59	2.02	2.58	0.74	44.21	58.49	8.92	9.48	000
58565		A	Hysteroscopy, sterilization	7.02	34.36	45.87	3.31	3.76	1.19	42.57	54.08	11.52	11.97	090
58600		A	Division of fallopian tube	5.84	NA	NA	2.85	3.22	0.66	NA	NA	9.35	9.72	090
58605		A	Division of fallopian tube	5.23	NA	NA	2.62	3.00	0.59	NA	NA	8.44	8.82	090
58611		A	Ligate oviduct(s) add-on	1.45	NA	NA	0.39	0.53	0.18	NA	NA	2.02	2.16	ZZZ
58615		A	Occlude fallopian tube(s)	3.89	NA	NA	1.95	2.52	0.47	NA	NA	6.31	6.88	010
58660		A	Laparoscopy, lysis	11.52	NA	NA	4.34	5.04	1.40	NA	NA	17.26	17.96	090
58661		A	Laparoscopy, remove adnexa	11.28	NA	NA	3.93	4.83	1.34	NA	NA	16.55	17.45	010
58662		A	Laparoscopy, excise lesions	12.05	NA	NA	4.61	5.50	1.43	NA	NA	18.09	18.98	090
58670		A	Laparoscopy, tubal cautery	5.84	NA	NA	2.79	3.16	0.67	NA	NA	9.30	9.67	090
58671		A	Laparoscopy, tubal block	5.84	NA	NA	2.80	3.16	0.68	NA	NA	9.32	9.68	090
58672		A	Laparoscopy, fimbrioplasty	12.86	NA	NA	4.69	5.82	1.60	NA	NA	19.15	20.28	090
58673		A	Laparoscopy, salpingostomy	13.97	NA	NA	5.12	6.22	1.69	NA	NA	20.78	21.88	090
58700		A	Removal of fallopian tube	12.80	NA	NA	5.45	5.86	1.51	NA	NA	19.76	20.17	090
58720		A	Removal of ovary/tube(s)	12.04	NA	NA	5.01	5.60	1.39	NA	NA	18.44	19.03	090
58740		A	Revise fallopian tube(s)	14.75	NA	NA	5.97	6.86	1.71	NA	NA	22.43	23.32	090
58750		A	Repair oviduct	15.52	NA	NA	5.97	7.03	1.84	NA	NA	23.33	24.39	090
58752		A	Revise ovarian tube(s)	15.52	NA	NA	5.93	6.70	1.80	NA	NA	23.25	24.02	090
58760		A	Remove tubal obstruction	13.81	NA	NA	5.51	6.43	1.79	NA	NA	21.11	22.03	090
58770		A	Create new tubal opening	14.65	NA	NA	5.66	6.61	1.73	NA	NA	22.04	22.99	090
58800		A	Drainage of ovarian cyst(s)	4.50	3.24	3.55	2.71	2.86	0.43	8.17	8.48	7.64	7.79	090
58805		A	Drainage of ovarian cyst(s)	6.30	NA	NA	3.50	3.51	0.69	NA	NA	10.49	10.50	090
58820		A	Drain ovary abscess, open	4.58	NA	NA	2.82	3.18	0.52	NA	NA	7.92	8.28	090
58822		A	Drain ovary abscess, percut	11.67	NA	NA	5.20	5.22	1.16	NA	NA	18.03	18.05	090
58823		A	Drain pelvic abscess, percut	3.37	20.91	21.26	1.14	1.13	0.24	24.52	24.87	4.75	4.74	000
58825		A	Transposition, ovary(s)	11.66	NA	NA	4.85	5.57	1.32	NA	NA	17.83	18.55	090
58900		A	Biopsy of ovary(s)	6.47	NA	NA	3.48	3.56	0.69	NA	NA	10.64	10.72	090
58920		A	Partial removal of ovary(s)	11.83	NA	NA	5.15	5.48	1.43	NA	NA	18.41	18.74	090
58925		A	Removal of ovarian cyst(s)	12.29	NA	NA	5.20	5.58	1.41	NA	NA	18.90	19.28	090
58940		A	Removal of ovary(s)	8.08	NA	NA	4.11	4.11	0.91	NA	NA	13.10	13.10	090
58943		A	Removal of ovary(s)	19.38	NA	NA	7.12	8.28	2.22	NA	NA	28.72	29.88	090
58950		A	Resect ovarian malignancy	18.18	NA	NA	7.13	8.10	2.04	NA	NA	27.35	28.32	090
58951		A	Resect ovarian malignancy	24.11	NA	NA	8.42	9.96	2.63	NA	NA	35.16	36.70	090
58952		A	Resect ovarian malignancy	27.09	NA	NA	9.57	11.23	3.02	NA	NA	39.68	41.34	090
58953		A	Tah, rad dissect for debulk	33.91	NA	NA	11.33	13.77	3.83	NA	NA	49.07	51.51	090
58954		A	Tah rad debulk/lymph remove	36.91	NA	NA	12.15	14.85	4.17	NA	NA	53.23	55.93	090
58956		A	Bso, omentectomy w/tah	22.59	NA	NA	8.38	9.85	4.00	NA	NA	34.97	36.44	090
58960		A	Exploration of abdomen	15.64	NA	NA	6.19	7.08	1.79	NA	NA	23.62	24.51	090
58970		A	Retrieval of oocyte	3.52	1.79	2.19	1.23	1.43	0.43	5.74	6.14	5.18	5.38	000
58976		A	Transfer of embryo	3.82	1.92	2.50	1.18	1.67	0.47	6.21	6.79	5.47	5.96	000
59000		A	Amniocentesis, diagnostic	1.30	1.73	1.99	0.54	0.64	0.31	3.34	3.60	2.15	2.25	000
59001		A	Amniocentesis, therapeutic	3.00	NA	NA	1.06	1.32	0.71	NA	NA	4.77	5.03	000
59012		A	Fetal cord puncture,prenatal	3.44	NA	NA	1.13	1.44	0.82	NA	NA	5.39	5.70	000

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CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
59015		A	Chorion biopsy	2.20	1.41	1.52	0.79	0.98	0.52	4.13	4.24	3.51	3.70	000
59020		A	Fetal contract stress test	0.66	1.07	0.85	NA	NA	0.26	1.99	1.77	NA	NA	000
59020	26	A	Fetal contract stress test	0.66	0.18	0.24	0.18	0.24	0.16	1.00	1.06	1.00	1.06	000
59020	TC	A	Fetal contract stress test	0.00	0.89	0.61	NA	NA	0.10	0.99	0.71	NA	NA	000
59025		A	Fetal non-stress test	0.53	0.62	0.49	NA	NA	0.15	1.30	1.17	NA	NA	000
59025	26	A	Fetal non-stress test	0.53	0.14	0.19	0.14	0.19	0.13	0.80	0.85	0.80	0.85	000
59025	TC	A	Fetal non-stress test	0.00	0.48	0.29	NA	NA	0.02	0.50	0.31	NA	NA	000
59030		A	Fetal scalp blood sample	1.99	NA	NA	0.54	0.71	0.47	NA	NA	3.00	3.17	000
59050		A	Fetal monitor w/report	0.89	NA	NA	0.26	0.33	0.21	NA	NA	1.36	1.43	XXX
59051		A	Fetal monitor/interpret only	0.74	NA	NA	0.20	0.27	0.17	NA	NA	1.11	1.18	XXX
59070		A	Transabdom amnioinfus w/us	5.24	4.40	4.97	1.77	2.18	0.28	9.92	10.49	7.29	7.70	000
59072		A	Umbilical cord occlud w/us	8.99	NA	NA	2.80	3.05	0.16	NA	NA	11.95	12.20	000
59074		A	Fetal fluid drainage w/us	5.24	3.84	4.40	1.66	2.16	0.28	9.36	9.92	7.18	7.68	000
59076		A	Fetal shunt placement, w/us	8.99	NA	NA	2.34	2.93	0.16	NA	NA	11.49	12.08	000
59100		A	Remove uterus lesion	13.22	NA	NA	5.68	6.27	2.94	NA	NA	21.84	22.43	090
59120		A	Treat ectopic pregnancy	12.52	NA	NA	5.34	6.03	2.72	NA	NA	20.58	21.27	090
59121		A	Treat ectopic pregnancy	12.60	NA	NA	5.28	6.08	2.78	NA	NA	20.66	21.46	090
59130		A	Treat ectopic pregnancy	14.94	NA	NA	5.99	5.10	3.38	NA	NA	24.31	23.42	090
59135		A	Treat ectopic pregnancy	14.78	NA	NA	4.98	6.68	3.30	NA	NA	23.06	24.76	090
59136		A	Treat ectopic pregnancy	14.11	NA	NA	5.62	6.37	3.13	NA	NA	22.86	23.61	090
59140		A	Treat ectopic pregnancy	5.82	1.31	1.99	2.85	2.38	1.29	8.42	9.10	9.96	9.49	090
59150		A	Treat ectopic pregnancy	12.15	NA	NA	5.00	5.76	2.78	NA	NA	19.93	20.69	090
59151		A	Treat ectopic pregnancy	11.97	NA	NA	4.89	5.78	2.73	NA	NA	19.59	20.48	090
59160		A	D & c after delivery	2.71	1.97	2.97	1.16	1.90	0.64	5.32	6.32	4.51	5.25	010
59200		A	Insert cervical dilator	0.79	0.93	1.13	0.22	0.28	0.19	1.91	2.11	1.20	1.26	000
59300		A	Episiotomy or vaginal repair	2.41	2.19	2.18	1.01	0.97	0.57	5.17	5.16	3.99	3.95	000
59320		A	Revision of cervix	2.48	NA	NA	0.99	1.18	0.59	NA	NA	4.06	4.25	000
59325		A	Revision of cervix	4.06	NA	NA	1.20	1.73	0.88	NA	NA	6.14	6.67	000
59350		A	Repair of uterus	4.94	NA	NA	1.36	1.75	1.17	NA	NA	7.47	7.86	000
59400		A	Obstetrical care	26.52	NA	NA	14.06	15.04	5.48	NA	NA	46.06	47.04	MMM
59409		A	Obstetrical care	13.48	NA	NA	3.64	4.90	3.21	NA	NA	20.33	21.59	MMM
59410		A	Obstetrical care	15.25	NA	NA	4.83	5.95	3.51	NA	NA	23.59	24.71	MMM
59412		A	Antepartum manipulation	1.71	NA	NA	0.63	0.77	0.40	NA	NA	2.74	2.88	MMM
59414		A	Deliver placenta	1.61	NA	NA	0.43	0.59	0.38	NA	NA	2.42	2.58	MMM
59425		A	Antepartum care only	6.12	4.18	4.20	1.62	1.80	1.14	11.44	11.46	8.88	9.06	MMM
59426		A	Antepartum care only	10.84	7.68	7.59	2.88	3.14	1.97	20.49	20.40	15.69	15.95	MMM
59430		A	Care after delivery	2.13	1.02	1.18	0.64	0.87	0.50	3.65	3.81	3.27	3.50	MMM
59510		A	Cesarean delivery	30.04	NA	NA	15.69	16.91	6.23	NA	NA	51.96	53.18	MMM
59514		A	Cesarean delivery only	15.95	NA	NA	4.36	5.76	3.79	NA	NA	24.10	25.50	MMM
59515		A	Cesarean delivery	18.20	NA	NA	6.07	7.41	4.12	NA	NA	28.39	29.73	MMM
59525		A	Remove uterus after cesarean	8.53	NA	NA	2.32	3.06	1.94	NA	NA	12.79	13.53	ZZZ
59610		A	Vbac delivery	27.95	NA	NA	14.30	15.51	5.85	NA	NA	48.10	49.31	MMM
59612		A	Vbac delivery only	15.04	NA	NA	4.14	5.59	3.58	NA	NA	22.76	24.21	MMM
59614		A	Vbac care after delivery	16.57	NA	NA	5.03	6.47	3.88	NA	NA	25.48	26.92	MMM
59618		A	Attempted vbac delivery	31.48	NA	NA	16.02	17.72	6.59	NA	NA	54.09	55.79	MMM
59620		A	Attempted vbac delivery only	17.50	NA	NA	4.65	6.25	4.16	NA	NA	26.31	27.91	MMM
59622		A	Attempted vbac after care	19.64	NA	NA	6.50	8.12	4.49	NA	NA	30.63	32.25	MMM
59812		A	Treatment of miscarriage	4.37	NA	NA	2.32	2.49	0.95	NA	NA	7.64	7.81	090
59820		A	Care of miscarriage	4.64	4.03	4.33	3.43	3.54	0.95	9.62	9.92	9.02	9.13	090
59821		A	Treatment of miscarriage	4.94	3.78	4.16	3.12	3.34	1.06	9.78	10.16	9.12	9.34	090
59830		A	Treat uterus infection	6.47	NA	NA	3.40	3.84	1.44	NA	NA	11.31	11.75	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
59840		R	Abortion	3.01	NA	NA	1.77	2.04	0.71	NA	NA	5.49	5.76	010
59841		R	Abortion	5.55	3.12	3.41	2.55	2.87	1.24	9.91	10.20	9.34	9.66	010
59850		R	Abortion	5.90	NA	NA	2.61	3.10	1.28	NA	NA	9.79	10.28	090
59851		R	Abortion	5.92	NA	NA	3.26	3.63	1.28	NA	NA	10.46	10.83	090
59852		R	Abortion	8.23	NA	NA	3.68	4.71	1.80	NA	NA	13.71	14.74	090
59855		R	Abortion	6.36	NA	NA	2.89	3.39	1.45	NA	NA	10.70	11.20	090
59856		R	Abortion	7.72	NA	NA	4.04	4.06	1.78	NA	NA	13.54	13.56	090
59857		R	Abortion	9.28	NA	NA	3.11	4.32	2.01	NA	NA	14.40	15.61	090
59866		R	Abortion (mpr)	3.99	NA	NA	1.22	1.73	0.87	NA	NA	6.08	6.59	000
59870		A	Evacuate mole of uterus	6.32	NA	NA	4.08	4.39	1.42	NA	NA	11.82	12.13	090
59871		A	Remove cerclage suture	2.13	1.12	1.59	0.92	1.08	0.50	3.75	4.22	3.55	3.71	000
60000		A	Drain thyroid/tongue cyst	1.76	2.05	1.96	1.66	1.70	0.15	3.96	3.87	3.57	3.61	010
60001		A	Aspirate/inject thyriod cyst	0.97	1.98	1.55	0.29	0.32	0.07	3.02	2.59	1.33	1.36	000
60100		A	Biopsy of thyroid	1.56	1.33	1.38	0.50	0.52	0.10	2.99	3.04	2.16	2.18	000
60200		A	Remove thyroid lesion	9.84	NA	NA	5.13	5.78	1.01	NA	NA	15.98	16.63	090
60210		A	Partial thyroid excision	11.11	NA	NA	4.96	5.48	1.23	NA	NA	17.30	17.82	090
60212		A	Partial thyroid excision	16.26	NA	NA	6.45	7.38	1.94	NA	NA	24.65	25.58	090
60220		A	Partial removal of thyroid	12.25	NA	NA	5.28	5.94	1.32	NA	NA	18.85	19.51	090
60225		A	Partial removal of thyroid	14.59	NA	NA	6.55	7.20	1.64	NA	NA	22.78	23.43	090
60240		A	Removal of thyroid	16.16	NA	NA	6.04	7.21	1.85	NA	NA	24.05	25.22	090
60252		A	Removal of thyroid	21.82	NA	NA	8.23	9.65	2.29	NA	NA	32.34	33.76	090
60254		A	Extensive thyroid surgery	28.23	NA	NA	10.07	13.15	2.60	NA	NA	40.90	43.98	090
60260		A	Repeat thyroid surgery	18.14	NA	NA	6.84	8.21	1.93	NA	NA	26.91	28.28	090
60270		A	Removal of thyroid	23.01	NA	NA	8.81	10.06	2.32	NA	NA	34.14	35.39	090
60271		A	Removal of thyroid	17.50	NA	NA	6.65	8.11	1.74	NA	NA	25.89	27.35	090
60280		A	Remove thyroid duct lesion	5.98	NA	NA	4.01	4.51	0.54	NA	NA	10.53	11.03	090
60281		A	Remove thyroid duct lesion	8.64	NA	NA	4.65	5.55	0.73	NA	NA	14.02	14.92	090
60500		A	Explore parathyroid glands	16.63	NA	NA	6.64	7.23	2.00	NA	NA	25.27	25.86	090
60502		A	Re-explore parathyroids	20.92	NA	NA	8.34	9.12	2.53	NA	NA	31.79	32.57	090
60505		A	Explore parathyroid glands	22.81	NA	NA	9.13	10.50	2.64	NA	NA	34.58	35.95	090
60512		A	Autotransplant parathyroid	4.44	NA	NA	1.15	1.50	0.53	NA	NA	6.12	6.47	ZZZ
60520		A	Removal of thymus gland	17.03	NA	NA	6.90	7.96	2.19	NA	NA	26.12	27.18	090
60521		A	Removal of thymus gland	19.09	NA	NA	8.37	9.27	2.81	NA	NA	30.27	31.17	090
60522		A	Removal of thymus gland	23.31	NA	NA	9.87	10.94	3.26	NA	NA	36.44	37.51	090
60540		A	Explore adrenal gland	17.84	NA	NA	8.20	7.75	1.74	NA	NA	27.78	27.33	090
60545		A	Explore adrenal gland	20.75	NA	NA	8.93	8.65	2.07	NA	NA	31.75	31.47	090
60600		A	Remove carotid body lesion	24.95	NA	NA	9.76	10.68	2.19	NA	NA	36.90	37.82	090
60605		A	Remove carotid body lesion	31.82	NA	NA	13.01	12.47	2.49	NA	NA	47.32	46.78	090
60650		A	Laparoscopy adrenalectomy	20.59	NA	NA	8.15	8.04	2.28	NA	NA	31.02	30.91	090
61000		A	Remove cranial cavity fluid	1.58	NA	NA	1.22	1.02	0.13	NA	NA	2.93	2.73	000
61001		A	Remove cranial cavity fluid	1.49	NA	NA	1.20	1.10	0.16	NA	NA	2.85	2.75	000
61020		A	Remove brain cavity fluid	1.51	NA	NA	1.54	1.39	0.34	NA	NA	3.39	3.24	000
61026		A	Injection into brain canal	1.69	NA	NA	1.48	1.41	0.33	NA	NA	3.50	3.43	000
61050		A	Remove brain canal fluid	1.51	NA	NA	1.16	1.24	0.11	NA	NA	2.78	2.86	000
61055		A	Injection into brain canal	2.10	NA	NA	1.34	1.40	0.17	NA	NA	3.61	3.67	000
61070		A	Brain canal shunt procedure	0.89	NA	NA	1.17	1.05	0.17	NA	NA	2.23	2.11	000
61105		A	Twist drill hole	5.38	NA	NA	4.77	4.15	1.32	NA	NA	11.47	10.85	090
61107		A	Drill skull for implantation	4.99	NA	NA	1.79	2.35	1.29	NA	NA	8.07	8.63	000
61108		A	Drill skull for drainage	11.45	NA	NA	8.21	7.42	2.63	NA	NA	22.29	21.50	090
61120		A	Burr hole for puncture	9.48	NA	NA	6.51	6.14	2.09	NA	NA	18.08	17.71	090
61140		A	Pierce skull for biopsy	17.04	NA	NA	10.11	9.96	4.11	NA	NA	31.26	31.11	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
61150		A	Pierce skull for drainage	18.76	NA	NA	10.49	10.42	4.31	NA	NA	33.56	33.49	090
61151		A	Pierce skull for drainage	13.37	NA	NA	8.25	7.94	3.00	NA	NA	24.62	24.31	090
61154		A	Pierce skull & remove clot	16.86	NA	NA	10.07	9.65	4.20	NA	NA	31.13	30.71	090
61156		A	Pierce skull for drainage	17.33	NA	NA	9.62	9.80	4.22	NA	NA	31.17	31.35	090
61210		A	Pierce skull, implant device	5.83	NA	NA	2.11	2.72	1.50	NA	NA	9.44	10.05	000
61215		A	Insert brain-fluid device	5.73	NA	NA	5.30	4.33	1.26	NA	NA	12.29	11.32	090
61250		A	Pierce skull & explore	11.37	NA	NA	7.33	6.99	2.76	NA	NA	21.46	21.12	090
61253		A	Pierce skull & explore	13.37	NA	NA	7.59	7.70	2.61	NA	NA	23.57	23.68	090
61304		A	Open skull for exploration	23.27	NA	NA	12.24	12.71	5.61	NA	NA	41.12	41.59	090
61305		A	Open skull for exploration	28.45	NA	NA	14.62	15.17	6.07	NA	NA	49.14	49.69	090
61312		A	Open skull for drainage	30.03	NA	NA	16.63	15.47	6.34	NA	NA	53.00	51.84	090
61313		A	Open skull for drainage	27.88	NA	NA	15.03	14.89	6.43	NA	NA	49.34	49.20	090
61314		A	Open skull for drainage	25.71	NA	NA	13.81	13.26	6.26	NA	NA	45.78	45.23	090
61315		A	Open skull for drainage	29.46	NA	NA	15.10	15.82	7.14	NA	NA	51.70	52.42	090
61316		A	Implt cran bone flap to abdo	1.39	NA	NA	0.51	0.58	0.35	NA	NA	2.25	2.32	ZZZ
61320		A	Open skull for drainage	27.28	NA	NA	13.87	14.56	6.60	NA	NA	47.75	48.44	090
61321		A	Open skull for drainage	30.34	NA	NA	13.87	15.60	7.12	NA	NA	51.33	53.06	090
61322		A	Decompressive craniotomy	34.00	NA	NA	17.25	16.10	7.61	NA	NA	58.86	57.71	090
61323		A	Decompressive lobectomy	34.87	NA	NA	16.53	16.23	8.01	NA	NA	59.41	59.11	090
61330		A	Decompress eye socket	25.11	NA	NA	11.52	13.20	2.31	NA	NA	38.94	40.62	090
61332		A	Explore/biopsy eye socket	28.46	NA	NA	13.05	14.99	4.82	NA	NA	46.33	48.27	090
61333		A	Explore orbit/remove lesion	29.13	NA	NA	12.91	14.94	3.91	NA	NA	45.95	47.98	090
61334		A	Explore orbit/remove object	19.46	NA	NA	8.87	10.21	1.74	NA	NA	30.07	31.41	090
61340		A	Subtemporal decompression	19.97	NA	NA	11.06	11.13	4.83	NA	NA	35.86	35.93	090
61343		A	Incise skull (press relief)	31.67	NA	NA	15.47	16.51	7.62	NA	NA	54.76	55.80	090
61345		A	Relieve cranial pressure	29.04	NA	NA	14.59	15.22	7.02	NA	NA	50.65	51.28	090
61440		A	Incise skull for surgery	28.47	NA	NA	13.33	14.01	6.88	NA	NA	48.68	49.36	090
61450		A	Incise skull for surgery	27.55	NA	NA	12.17	13.78	5.77	NA	NA	45.49	47.10	090
61458		A	Incise skull for brain wound	28.65	NA	NA	14.37	15.26	7.01	NA	NA	50.03	50.92	090
61460		A	Incise skull for surgery	30.05	NA	NA	14.50	15.97	6.02	NA	NA	50.57	52.04	090
61470		A	Incise skull for surgery	27.48	NA	NA	12.55	13.56	5.88	NA	NA	45.91	46.92	090
61480		A	Incise skull for surgery	27.91	NA	NA	7.88	13.45	6.71	NA	NA	42.50	48.07	090
61490		A	Incise skull for surgery	27.08	NA	NA	13.14	14.06	6.90	NA	NA	47.12	48.04	090
61500		A	Removal of skull lesion	18.99	NA	NA	10.15	10.66	4.10	NA	NA	33.24	33.75	090
61501		A	Remove infected skull bone	16.16	NA	NA	9.12	9.20	3.21	NA	NA	28.49	28.57	090
61510		A	Removal of brain lesion	30.55	NA	NA	16.38	16.65	7.33	NA	NA	54.26	54.53	090
61512		A	Remove brain lining lesion	36.93	NA	NA	17.81	19.25	9.05	NA	NA	63.79	65.23	090
61514		A	Removal of brain abscess	27.04	NA	NA	13.90	14.33	6.52	NA	NA	47.46	47.89	090
61516		A	Removal of brain lesion	26.39	NA	NA	13.67	14.14	6.33	NA	NA	46.39	46.86	090
61517		A	Implt brain chemotx add-on	1.38	NA	NA	0.50	0.61	0.35	NA	NA	2.23	2.34	ZZZ
61518		A	Removal of brain lesion	39.61	NA	NA	19.64	20.77	9.62	NA	NA	68.87	70.00	090
61519		A	Remove brain lining lesion	43.22	NA	NA	19.98	22.03	10.60	NA	NA	73.80	75.85	090
61520		A	Removal of brain lesion	56.81	NA	NA	24.67	28.98	11.18	NA	NA	92.66	96.97	090
61521		A	Removal of brain lesion	46.78	NA	NA	21.28	23.53	11.36	NA	NA	79.42	81.67	090
61522		A	Removal of brain abscess	31.35	NA	NA	14.89	16.07	7.60	NA	NA	53.84	55.02	090
61524		A	Removal of brain lesion	29.70	NA	NA	15.09	15.56	7.14	NA	NA	51.93	52.40	090
61526		A	Removal of brain lesion	53.84	NA	NA	20.86	27.39	7.05	NA	NA	81.75	88.28	090
61530		A	Removal of brain lesion	45.37	NA	NA	17.57	23.23	6.13	NA	NA	69.07	74.73	090
61531		A	Implant brain electrodes	16.24	NA	NA	9.79	9.31	3.78	NA	NA	29.81	29.33	090
61533		A	Implant brain electrodes	21.32	NA	NA	11.23	11.48	5.10	NA	NA	37.65	37.90	090
61534		A	Removal of brain lesion	22.82	NA	NA	12.62	12.25	5.42	NA	NA	40.86	40.49	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
61535		A	Remove brain electrodes	13.01	NA	NA	8.47	7.70	3.01	NA	NA	24.49	23.72	090
61536		A	Removal of brain lesion	37.53	NA	NA	17.70	19.31	9.18	NA	NA	64.41	66.02	090
61537		A	Removal of brain tissue	36.31	NA	NA	17.68	15.51	6.92	NA	NA	60.91	58.74	090
61538		A	Removal of brain tissue	39.31	NA	NA	18.75	16.20	6.92	NA	NA	64.98	62.43	090
61539		A	Removal of brain tissue	34.09	NA	NA	14.79	17.06	8.30	NA	NA	57.18	59.45	090
61540		A	Removal of brain tissue	31.24	NA	NA	15.44	16.83	8.30	NA	NA	54.98	56.37	090
61541		A	Incision of brain tissue	30.75	NA	NA	15.41	16.04	6.58	NA	NA	52.74	53.37	090
61542		A	Removal of brain tissue	32.97	NA	NA	16.18	17.45	8.01	NA	NA	57.16	58.43	090
61543		A	Removal of brain tissue	31.12	NA	NA	15.64	16.23	7.54	NA	NA	54.30	54.89	090
61544		A	Remove & treat brain lesion	27.22	NA	NA	13.75	13.83	5.95	NA	NA	46.92	47.00	090
61545		A	Excision of brain tumor	46.15	NA	NA	21.88	23.68	10.60	NA	NA	78.63	80.43	090
61546		A	Removal of pituitary gland	33.25	NA	NA	15.92	17.14	7.65	NA	NA	56.82	58.04	090
61548		A	Removal of pituitary gland	23.23	NA	NA	10.87	12.33	3.42	NA	NA	37.52	38.98	090
61550		A	Release of skull seams	15.38	NA	NA	3.61	6.12	0.98	NA	NA	19.97	22.48	090
61552		A	Release of skull seams	20.21	NA	NA	6.42	8.46	1.06	NA	NA	27.69	29.73	090
61556		A	Incise skull/sutures	23.96	NA	NA	12.20	11.59	4.64	NA	NA	40.80	40.19	090
61557		A	Incise skull/sutures	23.10	NA	NA	13.12	13.53	5.78	NA	NA	42.00	42.41	090
61558		A	Excision of skull/sutures	26.29	NA	NA	7.91	12.65	1.36	NA	NA	35.56	40.30	090
61559		A	Excision of skull/sutures	33.74	NA	NA	18.22	19.08	8.48	NA	NA	60.44	61.30	090
61563		A	Excision of skull tumor	28.31	NA	NA	13.71	14.89	5.15	NA	NA	47.17	48.35	090
61564		A	Excision of skull tumor	34.53	NA	NA	15.61	17.65	8.75	NA	NA	58.89	60.93	090
61566		A	Removal of brain tissue	32.26	NA	NA	16.15	17.40	6.92	NA	NA	55.33	56.58	090
61567		A	Incision of brain tissue	36.76	NA	NA	15.60	19.45	6.52	NA	NA	58.88	62.73	090
61570		A	Remove foreign body, brain	26.32	NA	NA	13.55	13.85	5.86	NA	NA	45.73	46.03	090
61571		A	Incise skull for brain wound	28.23	NA	NA	14.54	15.02	6.77	NA	NA	49.54	50.02	090
61575		A	Skull base/brainstem surgery	36.37	NA	NA	14.97	18.51	5.32	NA	NA	56.66	60.20	090
61576		A	Skull base/brainstem surgery	55.03	NA	NA	25.34	32.46	5.56	NA	NA	85.93	93.05	090
61580		A	Craniofacial approach, skull	34.26	NA	NA	20.27	24.31	3.36	NA	NA	57.89	61.93	090
61581		A	Craniofacial approach, skull	38.78	NA	NA	24.44	23.74	3.91	NA	NA	67.13	66.43	090
61582		A	Craniofacial approach, skull	34.83	NA	NA	30.11	28.06	7.19	NA	NA	72.13	70.08	090
61583		A	Craniofacial approach, skull	38.37	NA	NA	25.25	25.20	9.18	NA	NA	72.80	72.75	090
61584		A	Orbitocranial approach/skull	37.57	NA	NA	24.96	24.68	8.16	NA	NA	70.69	70.41	090
61585		A	Orbitocranial approach/skull	42.40	NA	NA	24.18	25.97	7.01	NA	NA	73.59	75.38	090
61586		A	Resect nasopharynx, skull	27.20	NA	NA	23.74	22.92	4.36	NA	NA	55.30	54.48	090
61590		A	Infratemporal approach/skull	46.79	NA	NA	22.77	27.22	5.29	NA	NA	74.85	79.30	090
61591		A	Infratemporal approach/skull	46.81	NA	NA	23.24	28.02	5.64	NA	NA	75.69	80.47	090
61592		A	Orbitocranial approach/skull	42.94	NA	NA	26.82	26.64	10.04	NA	NA	79.80	79.62	090
61595		A	Transtemporal approach/skull	33.49	NA	NA	18.82	21.51	3.97	NA	NA	56.28	58.97	090
61596		A	Transcochlear approach/skull	39.25	NA	NA	18.02	22.89	3.39	NA	NA	60.66	65.53	090
61597		A	Transcondylar approach/skull	40.67	NA	NA	22.37	22.89	8.81	NA	NA	71.85	72.37	090
61598		A	Transpetrosal approach/skull	36.35	NA	NA	20.60	22.63	5.68	NA	NA	62.63	64.66	090
61600		A	Resect/excise cranial lesion	29.76	NA	NA	17.83	19.33	3.78	NA	NA	51.37	52.87	090
61601		A	Resect/excise cranial lesion	31.00	NA	NA	21.93	20.90	6.61	NA	NA	59.54	58.51	090
61605		A	Resect/excise cranial lesion	32.32	NA	NA	17.26	20.83	2.85	NA	NA	52.43	56.00	090
61606		A	Resect/excise cranial lesion	41.88	NA	NA	23.64	24.83	8.94	NA	NA	74.46	75.65	090
61607		A	Resect/excise cranial lesion	40.76	NA	NA	20.04	22.90	6.88	NA	NA	67.68	70.54	090
61608		A	Resect/excise cranial lesion	45.39	NA	NA	25.77	26.44	10.72	NA	NA	81.88	82.55	090
61609		A	Transect artery, sinus	9.88	NA	NA	3.60	4.55	2.55	NA	NA	16.03	16.98	ZZZ
61610		A	Transect artery, sinus	29.63	NA	NA	10.81	12.59	7.66	NA	NA	48.10	49.88	ZZZ
61611		A	Transect artery, sinus	7.41	NA	NA	2.70	3.55	1.88	NA	NA	11.99	12.84	ZZZ
61612		A	Transect artery, sinus	27.84	NA	NA	7.90	11.99	4.30	NA	NA	40.04	44.13	ZZZ

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
61613		A	Remove aneurysm, sinus	44.88	NA	NA	26.76	26.45	8.42	NA	NA	80.06	79.75	090
61615		A	Resect/excise lesion, skull	35.57	NA	NA	18.86	21.81	4.72	NA	NA	59.15	62.10	090
61616		A	Resect/excise lesion, skull	46.54	NA	NA	25.81	28.00	8.24	NA	NA	80.59	82.78	090
61618		A	Repair dura	18.52	NA	NA	9.63	10.26	3.71	NA	NA	31.86	32.49	090
61619		A	Repair dura	21.95	NA	NA	10.50	11.84	3.94	NA	NA	36.39	37.73	090
61623		A	Endovasc tempory vessel occl	9.95	NA	NA	3.63	3.98	1.05	NA	NA	14.63	14.98	000
61624		A	Transcath occlusion, cns	20.12	NA	NA	7.25	7.00	1.95	NA	NA	29.32	29.07	000
61626		A	Transcath occlusion, non-cns	16.60	NA	NA	5.93	5.63	1.24	NA	NA	23.77	23.47	000
61630		N	Intracranial angioplasty	22.03	NA	NA	6.30	10.97	2.01	NA	NA	30.34	35.01	090
61635		N	Intracran angioplsty w/stent	24.24	NA	NA	6.80	11.89	2.20	NA	NA	33.24	38.33	090
61680		A	Intracranial vessel surgery	32.34	NA	NA	16.16	17.15	7.93	NA	NA	56.43	57.42	090
61682		A	Intracranial vessel surgery	63.27	NA	NA	26.23	30.78	15.85	NA	NA	105.4	109.9	090
61684		A	Intracranial vessel surgery	41.43	NA	NA	19.63	21.45	10.28	NA	NA	71.34	73.16	090
61686		A	Intracranial vessel surgery	67.26	NA	NA	29.13	33.40	16.66	NA	NA	113.1	117.3	090
61690		A	Intracranial vessel surgery	31.14	NA	NA	15.24	16.39	6.92	NA	NA	53.30	54.45	090
61692		A	Intracranial vessel surgery	54.39	NA	NA	23.81	26.62	13.39	NA	NA	91.59	94.40	090
61697		A	Brain aneurysm repr, complx	63.16	NA	NA	28.59	28.22	12.81	NA	NA	104.6	104.2	090
61698		A	Brain aneurysm repr, complx	69.39	NA	NA	30.54	27.71	12.50	NA	NA	112.4	109.6	090
61700		A	Brain aneurysm repr, simple	50.44	NA	NA	23.58	26.81	12.98	NA	NA	87.00	90.23	090
61702		A	Inner skull vessel surgery	59.80	NA	NA	25.60	25.98	10.76	NA	NA	96.16	96.54	090
61703		A	Clamp neck artery	18.66	NA	NA	10.41	10.47	4.05	NA	NA	33.12	33.18	090
61705		A	Revise circulation to head	37.91	NA	NA	17.47	18.85	8.84	NA	NA	64.22	65.60	090
61708		A	Revise circulation to head	37.01	NA	NA	14.20	14.94	2.50	NA	NA	53.71	54.45	090
61710		A	Revise circulation to head	31.15	NA	NA	13.64	13.67	4.51	NA	NA	49.30	49.33	090
61711		A	Fusion of skull arteries	38.04	NA	NA	17.80	19.35	9.39	NA	NA	65.23	66.78	090
61720		A	Incise skull/brain surgery	17.48	NA	NA	7.79	9.45	2.78	NA	NA	28.05	29.71	090
61735		A	Incise skull/brain surgery	22.16	NA	NA	11.16	11.94	2.72	NA	NA	36.04	36.82	090
61750		A	Incise skull/brain biopsy	19.69	NA	NA	10.45	10.59	4.71	NA	NA	34.85	34.99	090
61751		A	Brain biopsy w/ct/mr guide	18.58	NA	NA	10.91	10.87	4.55	NA	NA	34.04	34.00	090
61760		A	Implant brain electrodes	22.24	NA	NA	11.38	9.40	5.40	NA	NA	39.02	37.04	090
61770		A	Incise skull for treatment	23.05	NA	NA	9.50	11.59	3.54	NA	NA	36.09	38.18	090
61790		A	Treat trigeminal nerve	11.46	NA	NA	7.37	6.29	2.81	NA	NA	21.64	20.56	090
61791		A	Treat trigeminal tract	15.27	NA	NA	7.23	8.51	3.39	NA	NA	25.89	27.17	090
61793		A	Focus radiation beam	17.71	NA	NA	9.34	9.95	4.45	NA	NA	31.50	32.11	090
61795		A	Brain surgery using computer	4.03	NA	NA	1.32	1.86	0.79	NA	NA	6.14	6.68	ZZZ
61850		A	Implant neuroelectrodes	13.22	NA	NA	5.29	7.09	3.21	NA	NA	21.72	23.52	090
61860		A	Implant neuroelectrodes	22.12	NA	NA	10.67	11.74	4.94	NA	NA	37.73	38.80	090
61863		A	Implant neuroelectrode	20.50	NA	NA	12.13	11.88	5.41	NA	NA	38.04	37.79	090
61864		A	Implant neuroelectrde, addl	4.49	NA	NA	1.64	2.13	5.41	NA	NA	11.54	12.03	ZZZ
61867		A	Implant neuroelectrode	32.82	NA	NA	16.19	17.60	5.41	NA	NA	54.42	55.83	090
61868		A	Implant neuroelectrde, addll	7.91	NA	NA	2.86	3.73	5.41	NA	NA	16.18	17.05	ZZZ
61870		A	Implant neuroelectrodes	16.20	NA	NA	8.23	9.36	3.86	NA	NA	28.29	29.42	090
61875		A	Implant neuroelectrodes	16.32	NA	NA	5.14	7.73	2.94	NA	NA	24.40	26.99	090
61880		A	Revise/remove neuroelectrode	6.83	NA	NA	5.14	4.72	1.66	NA	NA	13.63	13.21	090
61885		A	Insrt/redo neurostim 1 array	7.29	NA	NA	7.07	5.76	1.59	NA	NA	15.95	14.64	090
61886		A	Implant neurostim arrays	9.65	NA	NA	8.33	6.86	1.96	NA	NA	19.94	18.47	090
61888		A	Revise/remove neuroreceiver	5.18	NA	NA	3.50	3.64	1.33	NA	NA	10.01	10.15	010
62000		A	Treat skull fracture	13.79	NA	NA	7.25	5.96	1.06	NA	NA	22.10	20.81	090
62005		A	Treat skull fracture	17.49	NA	NA	9.03	8.87	3.86	NA	NA	30.38	30.22	090
62010		A	Treatment of head injury	21.24	NA	NA	11.37	11.65	5.12	NA	NA	37.73	38.01	090
62100		A	Repair brain fluid leakage	23.34	NA	NA	11.34	12.45	4.83	NA	NA	39.51	40.62	090
62115		A	Reduction of skull defect	22.63	NA	NA	13.36	12.09	5.49	NA	NA	41.48	40.21	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
62116		A	Reduction of skull defect	24.82	NA	NA	12.71	13.23	6.09	NA	NA	43.62	44.14	090
62117		A	Reduction of skull defect	28.20	NA	NA	14.04	15.07	4.52	NA	NA	46.76	47.79	090
62120		A	Repair skull cavity lesion	24.31	NA	NA	15.50	17.77	2.99	NA	NA	42.80	45.07	090
62121		A	Incise skull repair	22.89	NA	NA	13.70	15.04	4.16	NA	NA	40.75	42.09	090
62140		A	Repair of skull defect	14.41	NA	NA	8.17	8.30	3.46	NA	NA	26.04	26.17	090
62141		A	Repair of skull defect	15.93	NA	NA	8.85	9.02	3.75	NA	NA	28.53	28.70	090
62142		A	Remove skull plate/flap	11.69	NA	NA	7.34	7.09	2.72	NA	NA	21.75	21.50	090
62143		A	Replace skull plate/flap	14.01	NA	NA	8.34	8.13	3.36	NA	NA	25.71	25.50	090
62145		A	Repair of skull & brain	19.95	NA	NA	9.81	10.64	4.49	NA	NA	34.25	35.08	090
62146		A	Repair of skull with graft	17.14	NA	NA	8.64	9.41	3.61	NA	NA	29.39	30.16	090
62147		A	Repair of skull with graft	20.53	NA	NA	10.11	11.03	4.31	NA	NA	34.95	35.87	090
62148		A	Retr bone flap to fix skull	2.00	NA	NA	0.73	0.83	0.48	NA	NA	3.21	3.31	ZZZ
62160		A	Neuroendoscopy add-on	3.00	NA	NA	1.08	1.42	0.77	NA	NA	4.85	5.19	ZZZ
62161		A	Dissect brain w/scope	21.04	NA	NA	11.77	12.04	5.17	NA	NA	37.98	38.25	090
62162		A	Remove colloid cyst w/scope	26.61	NA	NA	13.45	14.53	5.89	NA	NA	45.95	47.03	090
62163		A	Neuroendoscopy w/fb removal	16.34	NA	NA	10.23	10.02	4.00	NA	NA	30.57	30.36	090
62164		A	Remove brain tumor w/scope	29.19	NA	NA	14.54	14.88	5.36	NA	NA	49.09	49.43	090
62165		A	Remove pituit tumor w/scope	23.04	NA	NA	11.12	12.85	3.00	NA	NA	37.16	38.89	090
62180		A	Establish brain cavity shunt	22.41	NA	NA	11.45	12.10	4.97	NA	NA	38.83	39.48	090
62190		A	Establish brain cavity shunt	12.03	NA	NA	7.28	7.15	2.79	NA	NA	22.10	21.97	090
62192		A	Establish brain cavity shunt	13.21	NA	NA	7.96	7.72	3.01	NA	NA	24.18	23.94	090
62194		A	Replace/irrigate catheter	5.64	NA	NA	3.72	2.76	0.92	NA	NA	10.28	9.32	010
62200		A	Establish brain cavity shunt	19.15	NA	NA	10.18	10.70	4.64	NA	NA	33.97	34.49	090
62201		A	Brain cavity shunt w/scope	15.83	NA	NA	10.02	9.61	3.67	NA	NA	29.52	29.11	090
62220		A	Establish brain cavity shunt	13.96	NA	NA	7.99	8.00	3.34	NA	NA	25.29	25.30	090
62223		A	Establish brain cavity shunt	13.84	NA	NA	8.98	8.44	3.13	NA	NA	25.95	25.41	090
62225		A	Replace/irrigate catheter	6.07	NA	NA	5.15	4.36	1.39	NA	NA	12.61	11.82	090
62230		A	Replace/revise brain shunt	11.31	NA	NA	6.89	6.60	2.70	NA	NA	20.90	20.61	090
62252		A	Csf shunt reprogram	0.74	1.74	1.54	NA	NA	0.21	2.69	2.49	NA	NA	XXX
62252	26	A	Csf shunt reprogram	0.74	0.26	0.34	0.26	0.34	0.19	1.19	1.27	1.19	1.27	XXX
62252	TC	A	Csf shunt reprogram	0.00	1.48	1.20	NA	NA	0.02	1.50	1.22	NA	NA	XXX
62256		A	Remove brain cavity shunt	7.26	NA	NA	5.53	4.91	1.71	NA	NA	14.50	13.88	090
62258		A	Replace brain cavity shunt	15.50	NA	NA	8.81	8.76	3.73	NA	NA	28.04	27.99	090
62263		A	Epidural lysis mult sessions	6.37	9.12	11.83	2.84	3.11	0.41	15.90	18.61	9.62	9.89	010
62264		A	Epidural lysis on single day	4.42	5.74	7.25	1.28	1.39	0.27	10.43	11.94	5.97	6.08	010
62268		A	Drain spinal cord cyst	4.73	6.99	10.42	1.84	2.07	0.43	12.15	15.58	7.00	7.23	000
62269		A	Needle biopsy, spinal cord	5.01	7.00	12.79	1.73	1.92	0.37	12.38	18.17	7.11	7.30	000
62270		A	Spinal fluid tap, diagnostic	1.37	2.44	2.86	0.57	0.56	0.08	3.89	4.31	2.02	2.01	000
62272		A	Drain cerebro spinal fluid	1.35	3.19	3.51	0.62	0.69	0.18	4.72	5.04	2.15	2.22	000
62273		A	Inject epidural patch	2.15	1.70	2.47	0.58	0.68	0.13	3.98	4.75	2.86	2.96	000
62280		A	Treat spinal cord lesion	2.63	4.23	6.27	1.05	1.02	0.30	7.16	9.20	3.98	3.95	010
62281		A	Treat spinal cord lesion	2.66	3.77	5.20	0.90	0.89	0.19	6.62	8.05	3.75	3.74	010
62282		A	Treat spinal canal lesion	2.33	3.95	7.27	1.06	0.96	0.17	6.45	9.77	3.56	3.46	010
62284		A	Injection for myelogram	1.54	3.95	4.72	0.71	0.69	0.13	5.62	6.39	2.38	2.36	000
62287		A	Percutaneous diskectomy	8.82	NA	NA	4.22	5.23	0.58	NA	NA	13.62	14.63	090
62290		A	Inject for spine disk x-ray	3.00	4.49	6.49	1.14	1.32	0.23	7.72	9.72	4.37	4.55	000
62291		A	Inject for spine disk x-ray	2.91	4.29	5.54	1.08	1.19	0.26	7.46	8.71	4.25	4.36	000
62292		A	Injection into disk lesion	9.10	NA	NA	3.16	4.15	0.82	NA	NA	13.08	14.07	090
62294		A	Injection into spinal artery	12.73	NA	NA	5.58	5.60	1.24	NA	NA	19.55	19.57	090
62310		A	Inject spine c/t	1.91	3.05	4.38	0.57	0.63	0.12	5.08	6.41	2.60	2.66	000
62311		A	Inject spine l/s (cd)	1.54	2.70	4.37	0.53	0.58	0.09	4.33	6.00	2.16	2.21	000

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CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
62318		A	Inject spine w/cath, c/t	2.04	3.24	5.12	0.47	0.61	0.12	5.40	7.28	2.63	2.77	000
62319		A	Inject spine w/cath l/s (cd)	1.87	2.89	4.47	0.47	0.58	0.11	4.87	6.45	2.45	2.56	000
62350		A	Implant spinal canal cath	7.96	NA	NA	4.02	3.97	1.02	NA	NA	13.00	12.95	090
62351		A	Implant spinal canal cath	11.46	NA	NA	7.39	7.20	2.24	NA	NA	21.09	20.90	090
62355		A	Remove spinal canal catheter	6.54	NA	NA	3.44	3.24	0.71	NA	NA	10.69	10.49	090
62360		A	Insert spine infusion device	3.60	NA	NA	3.31	2.85	0.34	NA	NA	7.25	6.79	090
62361		A	Implant spine infusion pump	6.51	NA	NA	3.87	3.92	0.80	NA	NA	11.18	11.23	090
62362		A	Implant spine infusion pump	8.50	NA	NA	4.61	4.43	1.18	NA	NA	14.29	14.11	090
62365		A	Remove spine infusion device	6.51	NA	NA	3.78	3.64	0.86	NA	NA	11.15	11.01	090
62367		A	Analyze spine infusion pump	0.48	0.41	0.56	0.11	0.10	0.03	0.92	1.07	0.62	0.61	XXX
62368		A	Analyze spine infusion pump	0.75	0.60	0.67	0.18	0.17	0.06	1.41	1.48	0.99	0.98	XXX
63001		A	Removal of spinal lamina	17.47	NA	NA	9.62	9.56	3.76	NA	NA	30.85	30.79	090
63003		A	Removal of spinal lamina	17.60	NA	NA	9.54	9.80	3.72	NA	NA	30.86	31.12	090
63005		A	Removal of spinal lamina	16.22	NA	NA	9.53	9.88	3.34	NA	NA	29.09	29.44	090
63011		A	Removal of spinal lamina	15.72	NA	NA	9.00	8.47	3.37	NA	NA	28.09	27.56	090
63012		A	Removal of spinal lamina	16.66	NA	NA	9.59	10.01	3.48	NA	NA	29.73	30.15	090
63015		A	Removal of spinal lamina	20.64	NA	NA	11.68	11.85	4.75	NA	NA	37.07	37.24	090
63016		A	Removal of spinal lamina	21.85	NA	NA	11.63	11.77	4.58	NA	NA	38.06	38.20	090
63017		A	Removal of spinal lamina	17.12	NA	NA	10.16	10.36	3.63	NA	NA	30.91	31.11	090
63020		A	Neck spine disk surgery	15.99	NA	NA	9.73	9.71	3.71	NA	NA	29.43	29.41	090
63030		A	Low back disk surgery	12.97	NA	NA	8.46	8.45	3.00	NA	NA	24.43	24.42	090
63035		A	Spinal disk surgery add-on	3.15	NA	NA	1.17	1.49	0.79	NA	NA	5.11	5.43	ZZZ
63040		A	Laminotomy, single cervical	20.12	NA	NA	10.80	11.35	4.67	NA	NA	35.59	36.14	090
63042		A	Laminotomy, single lumbar	18.55	NA	NA	10.41	11.13	4.25	NA	NA	33.21	33.93	090
63045		A	Removal of spinal lamina	17.76	NA	NA	10.13	10.32	3.98	NA	NA	31.87	32.06	090
63046		A	Removal of spinal lamina	17.06	NA	NA	9.63	10.07	3.55	NA	NA	30.24	30.68	090
63047		A	Removal of spinal lamina	15.16	NA	NA	9.18	9.74	3.23	NA	NA	27.57	28.13	090
63048		A	Remove spinal lamina add-on	3.26	NA	NA	1.21	1.55	0.72	NA	NA	5.19	5.53	ZZZ
63050		A	Cervical laminoplasty	21.82	NA	NA	8.68	11.07	4.66	NA	NA	35.16	37.55	090
63051		A	C-laminoplasty w/graft/plate	25.32	NA	NA	11.43	12.99	4.66	NA	NA	41.41	42.97	090
63055		A	Decompress spinal cord	23.36	NA	NA	12.07	12.90	5.27	NA	NA	40.70	41.53	090
63056		A	Decompress spinal cord	21.67	NA	NA	11.11	12.23	4.75	NA	NA	37.53	38.65	090
63057		A	Decompress spine cord add-on	5.25	NA	NA	1.91	2.46	1.22	NA	NA	8.38	8.93	ZZZ
63064		A	Decompress spinal cord	26.03	NA	NA	13.04	14.11	5.69	NA	NA	44.76	45.83	090
63066		A	Decompress spine cord add-on	3.26	NA	NA	1.20	1.55	0.69	NA	NA	5.15	5.50	ZZZ
63075		A	Neck spine disk surgery	19.41	NA	NA	10.99	11.84	4.62	NA	NA	35.02	35.87	090
63076		A	Neck spine disk surgery	4.04	NA	NA	1.49	1.92	0.96	NA	NA	6.49	6.92	ZZZ
63077		A	Spine disk surgery, thorax	22.69	NA	NA	10.94	12.36	3.98	NA	NA	37.61	39.03	090
63078		A	Spine disk surgery, thorax	3.28	NA	NA	1.17	1.52	0.66	NA	NA	5.11	5.46	ZZZ
63081		A	Removal of vertebral body	25.92	NA	NA	13.25	14.08	5.54	NA	NA	44.71	45.54	090
63082		A	Remove vertebral body add-on	4.36	NA	NA	1.61	2.08	1.02	NA	NA	6.99	7.46	ZZZ
63085		A	Removal of vertebral body	29.29	NA	NA	13.49	15.01	4.48	NA	NA	47.26	48.78	090
63086		A	Remove vertebral body add-on	3.19	NA	NA	1.14	1.48	0.59	NA	NA	4.92	5.26	ZZZ
63087		A	Removal of vertebral body	37.32	NA	NA	16.46	18.75	6.20	NA	NA	59.98	62.27	090
63088		A	Remove vertebral body add-on	4.32	NA	NA	1.59	2.03	0.82	NA	NA	6.73	7.17	ZZZ
63090		A	Removal of vertebral body	30.71	NA	NA	13.90	15.54	4.21	NA	NA	48.82	50.46	090
63091		A	Remove vertebral body add-on	3.03	NA	NA	1.10	1.37	0.48	NA	NA	4.61	4.88	ZZZ
63101		A	Removal of vertebral body	33.84	NA	NA	16.71	18.68	5.69	NA	NA	56.24	58.21	090
63102		A	Removal of vertebral body	33.84	NA	NA	16.45	18.61	5.69	NA	NA	55.98	58.14	090
63103		A	Remove vertebral body add-on	4.82	NA	NA	1.72	2.31	0.69	NA	NA	7.23	7.82	ZZZ
63170		A	Incise spinal cord tract(s)	22.03	NA	NA	12.28	11.99	4.86	NA	NA	39.17	38.88	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
63172		A	Drainage of spinal cyst	19.61	NA	NA	10.97	10.75	4.48	NA	NA	35.06	34.84	090
63173		A	Drainage of spinal cyst	24.13	NA	NA	13.00	12.88	5.68	NA	NA	42.81	42.69	090
63180		A	Revise spinal cord ligaments	20.35	NA	NA	10.70	10.93	3.95	NA	NA	35.00	35.23	090
63182		A	Revise spinal cord ligaments	22.64	NA	NA	7.04	10.00	5.30	NA	NA	34.98	37.94	090
63185		A	Incise spinal column/nerves	16.30	NA	NA	9.87	8.55	2.79	NA	NA	28.96	27.64	090
63190		A	Incise spinal column/nerves	18.70	NA	NA	9.93	10.10	3.24	NA	NA	31.87	32.04	090
63191		A	Incise spinal column/nerves	18.73	NA	NA	10.50	10.50	6.34	NA	NA	35.57	35.57	090
63194		A	Incise spinal column & cord	21.91	NA	NA	7.01	10.56	3.26	NA	NA	32.18	35.73	090
63195		A	Incise spinal column & cord	21.50	NA	NA	11.83	11.26	4.87	NA	NA	38.20	37.63	090
63196		A	Incise spinal column & cord	25.08	NA	NA	13.47	13.43	5.76	NA	NA	44.31	44.27	090
63197		A	Incise spinal column & cord	23.89	NA	NA	13.04	12.44	5.36	NA	NA	42.29	41.69	090
63198		A	Incise spinal column & cord	29.69	NA	NA	8.74	8.52	6.43	NA	NA	44.86	44.64	090
63199		A	Incise spinal column & cord	31.26	NA	NA	9.10	13.58	1.40	NA	NA	41.76	46.24	090
63200		A	Release of spinal cord	21.26	NA	NA	11.23	11.30	4.96	NA	NA	37.45	37.52	090
63250		A	Revise spinal cord vessels	43.68	NA	NA	20.22	20.04	9.01	NA	NA	72.91	72.73	090
63251		A	Revise spinal cord vessels	44.42	NA	NA	20.50	22.11	10.41	NA	NA	75.33	76.94	090
63252		A	Revise spinal cord vessels	44.41	NA	NA	20.68	21.89	10.64	NA	NA	75.73	76.94	090
63265		A	Excise intraspinal lesion	23.64	NA	NA	12.53	12.73	5.43	NA	NA	41.60	41.80	090
63266		A	Excise intraspinal lesion	24.50	NA	NA	12.72	13.09	5.54	NA	NA	42.76	43.13	090
63267		A	Excise intraspinal lesion	19.26	NA	NA	10.74	11.01	4.37	NA	NA	34.37	34.64	090
63268		A	Excise intraspinal lesion	19.83	NA	NA	10.30	10.37	3.69	NA	NA	33.82	33.89	090
63270		A	Excise intraspinal lesion	29.62	NA	NA	15.05	15.39	6.82	NA	NA	51.49	51.83	090
63271		A	Excise intraspinal lesion	29.74	NA	NA	14.72	15.39	6.90	NA	NA	51.36	52.03	090
63272		A	Excise intraspinal lesion	27.31	NA	NA	13.73	14.47	6.18	NA	NA	47.22	47.96	090
63273		A	Excise intraspinal lesion	26.28	NA	NA	13.25	14.09	5.74	NA	NA	45.27	46.11	090
63275		A	Biopsy/excise spinal tumor	25.67	NA	NA	12.95	13.59	5.80	NA	NA	44.42	45.06	090
63276		A	Biopsy/excise spinal tumor	25.50	NA	NA	13.17	13.58	5.83	NA	NA	44.50	44.91	090
63277		A	Biopsy/excise spinal tumor	22.20	NA	NA	11.66	12.33	5.01	NA	NA	38.87	39.54	090
63278		A	Biopsy/excise spinal tumor	21.93	NA	NA	11.58	12.21	4.55	NA	NA	38.06	38.69	090
63280		A	Biopsy/excise spinal tumor	30.08	NA	NA	15.35	16.10	7.27	NA	NA	52.70	53.45	090
63281		A	Biopsy/excise spinal tumor	29.78	NA	NA	15.16	15.95	7.17	NA	NA	52.11	52.90	090
63282		A	Biopsy/excise spinal tumor	27.94	NA	NA	14.49	15.14	6.76	NA	NA	49.19	49.84	090
63283		A	Biopsy/excise spinal tumor	26.55	NA	NA	13.62	14.42	6.26	NA	NA	46.43	47.23	090
63285		A	Biopsy/excise spinal tumor	37.84	NA	NA	18.27	19.56	9.18	NA	NA	65.29	66.58	090
63286		A	Biopsy/excise spinal tumor	37.41	NA	NA	18.03	19.47	9.21	NA	NA	64.65	66.09	090
63287		A	Biopsy/excise spinal tumor	39.86	NA	NA	18.69	20.03	9.39	NA	NA	67.94	69.28	090
63290		A	Biopsy/excise spinal tumor	40.60	NA	NA	19.25	20.29	9.02	NA	NA	68.87	69.91	090
63295		A	Repair of laminectomy defect	5.25	NA	NA	1.29	1.94	1.03	NA	NA	7.57	8.22	ZZZ
63300		A	Removal of vertebral body	26.62	NA	NA	13.00	14.00	5.97	NA	NA	45.59	46.59	090
63301		A	Removal of vertebral body	31.35	NA	NA	14.54	15.33	5.39	NA	NA	51.28	52.07	090
63302		A	Removal of vertebral body	30.93	NA	NA	14.36	15.51	5.53	NA	NA	50.82	51.97	090
63303		A	Removal of vertebral body	33.37	NA	NA	14.23	16.27	4.68	NA	NA	52.28	54.32	090
63304		A	Removal of vertebral body	33.64	NA	NA	16.35	17.07	6.41	NA	NA	56.40	57.12	090
63305		A	Removal of vertebral body	36.03	NA	NA	16.98	17.81	5.71	NA	NA	58.72	59.55	090
63306		A	Removal of vertebral body	35.33	NA	NA	15.42	17.24	8.33	NA	NA	59.08	60.90	090
63307		A	Removal of vertebral body	34.74	NA	NA	16.93	16.87	4.46	NA	NA	56.13	56.07	090
63308		A	Remove vertebral body add-on	5.24	NA	NA	1.88	2.43	1.29	NA	NA	8.41	8.96	ZZZ
63600		A	Remove spinal cord lesion	14.98	NA	NA	4.52	5.19	1.52	NA	NA	21.02	21.69	090
63610		A	Stimulation of spinal cord	8.72	13.99	48.39	1.50	2.07	0.86	23.57	57.97	11.08	11.65	000
63615		A	Remove lesion of spinal cord	17.18	NA	NA	5.83	8.43	2.84	NA	NA	25.85	28.45	090
63650		A	Implant neuroelectrodes	7.53	NA	NA	2.85	3.10	0.53	NA	NA	10.91	11.16	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
63655		A	Implant neuroelectrodes	11.37	NA	NA	7.47	7.05	2.43	NA	NA	21.27	20.85	090
63660		A	Revise/remove neuroelectrode	6.83	NA	NA	3.21	3.52	0.78	NA	NA	10.82	11.13	090
63685		A	Insrt/redo spine n generator	7.83	NA	NA	3.59	4.01	1.05	NA	NA	12.47	12.89	090
63688		A	Revise/remove neuroreceiver	6.06	NA	NA	3.44	3.53	0.89	NA	NA	10.39	10.48	090
63700		A	Repair of spinal herniation	17.26	NA	NA	9.40	10.10	3.52	NA	NA	30.18	30.88	090
63702		A	Repair of spinal herniation	19.20	NA	NA	10.51	10.92	4.12	NA	NA	33.83	34.24	090
63704		A	Repair of spinal herniation	22.15	NA	NA	12.16	12.75	4.57	NA	NA	38.88	39.47	090
63706		A	Repair of spinal herniation	25.07	NA	NA	14.44	13.82	6.23	NA	NA	45.74	45.12	090
63707		A	Repair spinal fluid leakage	12.46	NA	NA	7.56	7.68	2.51	NA	NA	22.53	22.65	090
63709		A	Repair spinal fluid leakage	15.46	NA	NA	8.69	9.24	3.09	NA	NA	27.24	27.79	090
63710		A	Graft repair of spine defect	15.21	NA	NA	8.85	9.01	3.40	NA	NA	27.46	27.62	090
63740		A	Install spinal shunt	12.44	NA	NA	7.87	7.49	2.93	NA	NA	23.24	22.86	090
63741		A	Install spinal shunt	8.98	NA	NA	4.66	4.74	1.66	NA	NA	15.30	15.38	090
63744		A	Revision of spinal shunt	8.82	NA	NA	5.76	5.39	1.89	NA	NA	16.47	16.10	090
63746		A	Removal of spinal shunt	7.21	NA	NA	4.48	3.96	1.53	NA	NA	13.22	12.70	090
64400		A	N block inj, trigeminal	1.11	1.40	1.78	0.44	0.43	0.07	2.58	2.96	1.62	1.61	000
64402		A	N block inj, facial	1.25	1.44	1.57	0.52	0.58	0.09	2.78	2.91	1.86	1.92	000
64405		A	N block inj, occipital	1.32	1.16	1.39	0.49	0.47	0.08	2.56	2.79	1.89	1.87	000
64408		A	N block inj, vagus	1.41	1.44	1.55	0.69	0.81	0.10	2.95	3.06	2.20	2.32	000
64410		A	N block inj, phrenic	1.43	1.82	2.34	0.52	0.48	0.09	3.34	3.86	2.04	2.00	000
64412		A	N block inj, spinal accessor	1.18	2.03	2.50	0.54	0.46	0.08	3.29	3.76	1.80	1.72	000
64413		A	N block inj, cervical plexus	1.40	1.29	1.71	0.47	0.49	0.08	2.77	3.19	1.95	1.97	000
64415		A	N block inj, brachial plexus	1.48	1.49	2.48	0.34	0.43	0.09	3.06	4.05	1.91	2.00	000
64416		A	N block cont infuse, b plex	3.85	NA	NA	0.56	0.73	0.31	NA	NA	4.72	4.89	010
64417		A	N block inj, axillary	1.44	1.50	2.66	0.35	0.46	0.11	3.05	4.21	1.90	2.01	000
64418		A	N block inj, suprascapular	1.32	1.88	2.44	0.51	0.46	0.07	3.27	3.83	1.90	1.85	000
64420		A	N block inj, intercost, sng	1.18	2.38	3.51	0.44	0.43	0.08	3.64	4.77	1.70	1.69	000
64421		A	N block inj, intercost, mlt	1.68	3.52	5.46	0.52	0.52	0.11	5.31	7.25	2.31	2.31	000
64425		A	N block inj, ilio-ing/hypogi	1.75	1.33	1.57	0.55	0.54	0.13	3.21	3.45	2.43	2.42	000
64430		A	N block inj, pudendal	1.46	2.47	2.51	0.81	0.62	0.10	4.03	4.07	2.37	2.18	000
64435		A	N block inj, paracervical	1.45	1.97	2.39	0.54	0.65	0.16	3.58	4.00	2.15	2.26	000
64445		A	N block inj, sciatic, sng	1.48	1.65	2.42	0.51	0.50	0.10	3.23	4.00	2.09	2.08	000
64446		A	N blk inj, sciatic, cont inf	3.61	NA	NA	0.57	0.89	0.20	NA	NA	4.38	4.70	010
64447		A	N block inj fem, single	1.50	NA	NA	0.20	0.37	0.09	NA	NA	1.79	1.96	000
64448		A	N block inj fem, cont inf	3.36	NA	NA	0.46	0.72	0.18	NA	NA	4.00	4.26	010
64449		A	N block inj, lumbar plexus	3.24	NA	NA	0.48	0.84	0.15	NA	NA	3.87	4.23	010
64450		A	N block, other peripheral	1.27	1.28	1.25	0.49	0.48	0.13	2.68	2.65	1.89	1.88	000
64470		A	Inj paravertebral c/t	1.85	3.84	6.40	0.70	0.71	0.11	5.80	8.36	2.66	2.67	000
64472		A	Inj paravertebral c/t add-on	1.29	1.22	2.06	0.33	0.34	0.08	2.59	3.43	1.70	1.71	ZZZ
64475		A	Inj paravertebral l/s	1.41	3.70	6.10	0.59	0.62	0.10	5.21	7.61	2.10	2.13	000
64476		A	Inj paravertebral l/s add-on	0.98	1.11	1.88	0.23	0.24	0.07	2.16	2.93	1.28	1.29	ZZZ
64479		A	Inj foramen epidural c/t	2.20	3.78	6.58	0.81	0.87	0.12	6.10	8.90	3.13	3.19	000
64480		A	Inj foramen epidural add-on	1.54	1.48	2.51	0.37	0.45	0.10	3.12	4.15	2.01	2.09	ZZZ
64483		A	Inj foramen epidural l/s	1.90	3.83	6.89	0.75	0.81	0.11	5.84	8.90	2.76	2.82	000
64484		A	Inj foramen epidural add-on	1.33	1.61	2.87	0.32	0.36	0.08	3.02	4.28	1.73	1.77	ZZZ
64505		A	N block, spenopalatine gangl	1.36	1.10	1.21	0.71	0.67	0.10	2.56	2.67	2.17	2.13	000
64508		A	N block, carotid sinus s/p	1.12	1.88	2.97	0.48	0.68	0.07	3.07	4.16	1.67	1.87	000
64510		A	N block, stellate ganglion	1.22	1.91	3.07	0.43	0.49	0.07	3.20	4.36	1.72	1.78	000
64517		A	N block inj, hypogas plxs	2.20	1.69	2.47	0.66	0.82	0.11	4.00	4.78	2.97	3.13	000
64520		A	N block, lumbar/thoracic	1.35	2.62	4.52	0.52	0.54	0.08	4.05	5.95	1.95	1.97	000
64530		A	N block inj, celiac pelus	1.58	2.66	4.01	0.60	0.64	0.10	4.34	5.69	2.28	2.32	000
64550		A	Apply neurostimulator	0.18	0.20	0.26	0.06	0.05	0.01	0.39	0.45	0.25	0.24	000

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CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
64553		A	Implant neuroelectrodes	2.31	2.47	2.75	1.33	1.73	0.18	4.96	5.24	3.82	4.22	010
64555		A	Implant neuroelectrodes	2.27	2.56	2.97	1.35	1.23	0.19	5.02	5.43	3.81	3.69	010
64560		A	Implant neuroelectrodes	2.36	2.51	2.61	1.34	1.30	0.22	5.09	5.19	3.92	3.88	010
64561		A	Implant neuroelectrodes	7.05	20.42	27.71	3.96	3.08	0.51	27.98	35.27	11.52	10.64	010
64565		A	Implant neuroelectrodes	1.76	2.42	3.07	1.25	1.26	0.13	4.31	4.96	3.14	3.15	010
64573		A	Implant neuroelectrodes	8.11	NA	NA	5.17	5.24	1.60	NA	NA	14.88	14.95	090
64575		A	Implant neuroelectrodes	4.34	NA	NA	1.89	2.48	0.61	NA	NA	6.84	7.43	090
64577		A	Implant neuroelectrodes	4.61	NA	NA	2.74	3.15	1.04	NA	NA	8.39	8.80	090
64580		A	Implant neuroelectrodes	4.11	NA	NA	2.56	3.31	0.36	NA	NA	7.03	7.78	090
64581		A	Implant neuroelectrodes	14.13	NA	NA	6.89	5.77	1.05	NA	NA	22.07	20.95	090
64585		A	Revise/remove neuroelectrode	2.06	5.88	9.95	2.27	2.17	0.20	8.14	12.21	4.53	4.43	010
64590		A	Insrt/redo perph n generator	2.40	6.54	7.01	2.51	2.35	0.19	9.13	9.60	5.10	4.94	010
64595		A	Revise/remove neuroreceiver	1.73	6.62	9.47	2.24	2.01	0.19	8.54	11.39	4.16	3.93	010
64600		A	Injection treatment of nerve	3.44	5.25	8.35	1.56	1.63	0.34	9.03	12.13	5.34	5.41	010
64605		A	Injection treatment of nerve	5.60	7.56	9.08	2.34	2.23	0.79	13.95	15.47	8.73	8.62	010
64610		A	Injection treatment of nerve	7.15	9.23	8.98	3.43	3.65	1.58	17.96	17.71	12.16	12.38	010
64612		A	Destroy nerve, face muscle	1.96	1.49	2.24	1.31	1.32	0.11	3.56	4.31	3.38	3.39	010
64613		A	Destroy nerve, neck muscle	1.96	1.33	2.54	1.10	1.19	0.11	3.40	4.61	3.17	3.26	010
64614		A	Destroy nerve, extrem musc	2.20	1.59	2.82	1.28	1.30	0.10	3.89	5.12	3.58	3.60	010
64620		A	Injection treatment of nerve	2.84	3.44	4.66	1.16	1.29	0.20	6.48	7.70	4.20	4.33	010
64622		A	Destr paravertebrl nerve l/s	3.00	4.07	6.85	1.25	1.34	0.18	7.25	10.03	4.43	4.52	010
64623		A	Destr paravertebral n add-on	0.99	1.64	2.64	0.21	0.22	0.06	2.69	3.69	1.26	1.27	ZZZ
64626		A	Destr paravertebrl nerve c/t	3.78	4.70	7.03	1.84	1.94	0.20	8.68	11.01	5.82	5.92	010
64627		A	Destr paravertebral n add-on	1.16	2.37	4.00	0.24	0.26	0.07	3.60	5.23	1.47	1.49	ZZZ
64630		A	Injection treatment of nerve	3.00	2.82	2.76	1.89	1.53	0.22	6.04	5.98	5.11	4.75	010
64640		A	Injection treatment of nerve	2.76	2.41	3.75	1.41	1.74	0.29	5.46	6.80	4.46	4.79	010
64650		A	Chemodenerv eccrine glands	0.70	0.77	0.85	0.17	0.27	0.06	1.53	1.61	0.93	1.03	000
64653		A	Chemodenerv eccrine glands	0.88	0.81	0.89	0.21	0.34	0.08	1.77	1.85	1.17	1.30	000
64680		A	Injection treatment of nerve	2.62	4.03	6.06	1.10	1.35	0.18	6.83	8.86	3.90	4.15	010
64681		A	Injection treatment of nerve	3.78	4.90	8.22	1.30	1.88	0.28	8.96	12.28	5.36	5.94	010
64702		A	Revise finger/toe nerve	6.02	NA	NA	4.02	3.91	0.61	NA	NA	10.65	10.54	090
64704		A	Revise hand/foot nerve	4.56	NA	NA	3.02	3.25	0.61	NA	NA	8.19	8.42	090
64708		A	Revise arm/leg nerve	6.17	NA	NA	4.08	4.67	0.96	NA	NA	11.21	11.80	090
64712		A	Revision of sciatic nerve	7.92	NA	NA	4.30	4.80	0.95	NA	NA	13.17	13.67	090
64713		A	Revision of arm nerve(s)	11.22	NA	NA	6.29	5.99	1.82	NA	NA	19.33	19.03	090
64714		A	Revise low back nerve(s)	10.37	NA	NA	4.69	4.33	1.19	NA	NA	16.25	15.89	090
64716		A	Revision of cranial nerve	6.80	NA	NA	5.04	5.75	0.63	NA	NA	12.47	13.18	090
64718		A	Revise ulnar nerve at elbow	6.98	NA	NA	5.98	6.00	1.05	NA	NA	14.01	14.03	090
64719		A	Revise ulnar nerve at wrist	4.84	NA	NA	3.96	4.39	0.77	NA	NA	9.57	10.00	090
64721		A	Carpal tunnel surgery	4.78	NA	NA	4.64	5.20	0.73	NA	NA	10.15	10.71	090
64722		A	Relieve pressure on nerve(s)	4.69	NA	NA	2.70	2.96	0.48	NA	NA	7.87	8.13	090
64726		A	Release foot/toe nerve	4.17	NA	NA	2.57	2.74	0.54	NA	NA	7.28	7.45	090
64727		A	Internal nerve revision	3.10	NA	NA	1.19	1.42	0.48	NA	NA	4.77	5.00	ZZZ
64732		A	Incision of brow nerve	4.77	NA	NA	4.02	3.64	0.98	NA	NA	9.77	9.39	090
64734		A	Incision of cheek nerve	5.41	NA	NA	4.38	4.14	0.89	NA	NA	10.68	10.44	090
64736		A	Incision of chin nerve	5.09	NA	NA	3.70	3.95	0.52	NA	NA	9.31	9.56	090
64738		A	Incision of jaw nerve	6.22	NA	NA	4.04	4.48	1.08	NA	NA	11.34	11.78	090
64740		A	Incision of tongue nerve	6.08	NA	NA	4.37	4.94	0.69	NA	NA	11.14	11.71	090
64742		A	Incision of facial nerve	6.71	NA	NA	4.14	4.57	0.73	NA	NA	11.58	12.01	090
64744		A	Incise nerve, back of head	5.60	NA	NA	4.33	3.92	1.16	NA	NA	11.09	10.68	090
64746		A	Incise diaphragm nerve	6.42	NA	NA	3.77	4.33	0.82	NA	NA	11.01	11.57	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
64752		A	Incision of vagus nerve	7.55	NA	NA	3.91	4.20	0.93	NA	NA	12.39	12.68	090
64755		A	Incision of stomach nerves	14.93	NA	NA	5.63	5.65	1.83	NA	NA	22.39	22.41	090
64760		A	Incision of vagus nerve	7.45	NA	NA	3.70	3.52	0.81	NA	NA	11.96	11.78	090
64761		A	Incision of pelvis nerve	6.90	NA	NA	3.87	3.62	0.53	NA	NA	11.30	11.05	090
64763		A	Incise hip/thigh nerve	7.42	NA	NA	4.83	5.12	0.94	NA	NA	13.19	13.48	090
64766		A	Incise hip/thigh nerve	9.28	NA	NA	5.07	5.21	1.06	NA	NA	15.41	15.55	090
64771		A	Sever cranial nerve	7.96	NA	NA	5.05	5.44	1.23	NA	NA	14.24	14.63	090
64772		A	Incision of spinal nerve	7.70	NA	NA	5.06	4.96	1.40	NA	NA	14.16	14.06	090
64774		A	Remove skin nerve lesion	5.66	NA	NA	3.79	3.83	0.74	NA	NA	10.19	10.23	090
64776		A	Remove digit nerve lesion	5.48	NA	NA	3.56	3.66	0.76	NA	NA	9.80	9.90	090
64778		A	Digit nerve surgery add-on	3.11	NA	NA	1.16	1.42	0.46	NA	NA	4.73	4.99	ZZZ
64782		A	Remove limb nerve lesion	6.72	NA	NA	3.91	3.81	0.86	NA	NA	11.49	11.39	090
64783		A	Limb nerve surgery add-on	3.71	NA	NA	1.37	1.72	0.51	NA	NA	5.59	5.94	ZZZ
64784		A	Remove nerve lesion	10.43	NA	NA	5.95	6.45	1.38	NA	NA	17.76	18.26	090
64786		A	Remove sciatic nerve lesion	16.06	NA	NA	8.63	9.55	2.60	NA	NA	27.29	28.21	090
64787		A	Implant nerve end	4.29	NA	NA	1.55	1.99	0.58	NA	NA	6.42	6.86	ZZZ
64788		A	Remove skin nerve lesion	5.10	NA	NA	3.68	3.52	0.73	NA	NA	9.51	9.35	090
64790		A	Removal of nerve lesion	11.91	NA	NA	6.60	7.07	2.10	NA	NA	20.61	21.08	090
64792		A	Removal of nerve lesion	15.65	NA	NA	8.11	8.67	2.48	NA	NA	26.24	26.80	090
64795		A	Biopsy of nerve	3.01	NA	NA	1.42	1.53	0.52	NA	NA	4.95	5.06	000
64802		A	Remove sympathetic nerves	10.18	NA	NA	4.08	4.88	1.29	NA	NA	15.55	16.35	090
64804		A	Remove sympathetic nerves	15.72	NA	NA	6.10	6.91	2.14	NA	NA	23.96	24.77	090
64809		A	Remove sympathetic nerves	14.57	NA	NA	6.58	5.98	1.50	NA	NA	22.65	22.05	090
64818		A	Remove sympathetic nerves	11.20	NA	NA	4.32	5.06	1.33	NA	NA	16.85	17.59	090
64820		A	Remove sympathetic nerves	10.60	NA	NA	6.76	7.05	1.49	NA	NA	18.85	19.14	090
64821		A	Remove sympathetic nerves	9.11	NA	NA	6.51	7.15	1.24	NA	NA	16.86	17.50	090
64822		A	Remove sympathetic nerves	9.11	NA	NA	6.32	7.02	1.30	NA	NA	16.73	17.43	090
64823		A	Remove sympathetic nerves	10.72	NA	NA	7.08	7.88	1.57	NA	NA	19.37	20.17	090
64831		A	Repair of digit nerve	10.17	NA	NA	6.41	6.92	1.41	NA	NA	17.99	18.50	090
64832		A	Repair nerve add-on	5.65	NA	NA	2.28	2.78	0.85	NA	NA	8.78	9.28	ZZZ
64834		A	Repair of hand or foot nerve	10.67	NA	NA	6.32	6.91	1.54	NA	NA	18.53	19.12	090
64835		A	Repair of hand or foot nerve	11.54	NA	NA	7.03	7.54	1.73	NA	NA	20.30	20.81	090
64836		A	Repair of hand or foot nerve	11.54	NA	NA	6.78	7.46	1.67	NA	NA	19.99	20.67	090
64837		A	Repair nerve add-on	6.25	NA	NA	2.62	3.09	0.97	NA	NA	9.84	10.31	ZZZ
64840		A	Repair of leg nerve	13.81	NA	NA	4.86	7.42	1.37	NA	NA	20.04	22.60	090
64856		A	Repair/transpose nerve	14.88	NA	NA	8.36	9.00	2.12	NA	NA	25.36	26.00	090
64857		A	Repair arm/leg nerve	15.63	NA	NA	8.61	9.40	2.21	NA	NA	26.45	27.24	090
64858		A	Repair sciatic nerve	17.63	NA	NA	9.80	10.55	3.33	NA	NA	30.76	31.51	090
64859		A	Nerve surgery	4.25	NA	NA	1.83	2.11	0.67	NA	NA	6.75	7.03	ZZZ
64861		A	Repair of arm nerves	20.68	NA	NA	9.71	11.28	4.08	NA	NA	34.47	36.04	090
64862		A	Repair of low back nerves	20.88	NA	NA	6.55	10.61	4.31	NA	NA	31.74	35.80	090
64864		A	Repair of facial nerve	13.27	NA	NA	6.90	8.32	1.26	NA	NA	21.43	22.85	090
64865		A	Repair of facial nerve	15.90	NA	NA	9.72	12.60	1.50	NA	NA	27.12	30.00	090
64866		A	Fusion of facial/other nerve	16.64	NA	NA	12.02	12.91	2.04	NA	NA	30.70	31.59	090
64868		A	Fusion of facial/other nerve	14.76	NA	NA	8.96	10.84	1.43	NA	NA	25.15	27.03	090
64870		A	Fusion of facial/other nerve	16.89	NA	NA	8.06	8.58	1.30	NA	NA	26.25	26.77	090
64872		A	Subsequent repair of nerve	1.99	NA	NA	0.79	1.01	0.29	NA	NA	3.07	3.29	ZZZ
64874		A	Repair & revise nerve add-on	2.98	NA	NA	1.17	1.44	0.42	NA	NA	4.57	4.84	ZZZ
64876		A	Repair nerve/shorten bone	3.37	NA	NA	0.76	1.50	0.47	NA	NA	4.60	5.34	ZZZ
64885		A	Nerve graft, head or neck	17.50	NA	NA	8.66	10.89	1.63	NA	NA	27.79	30.02	090
64886		A	Nerve graft, head or neck	20.72	NA	NA	9.55	12.57	2.08	NA	NA	32.35	35.37	090
64890		A	Nerve graft, hand or foot	16.05	NA	NA	8.75	9.70	2.29	NA	NA	27.09	28.04	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
64891		A	Nerve graft, hand or foot	17.16	NA	NA	9.52	8.08	1.63	NA	NA	28.31	26.87	090
64892		A	Nerve graft, arm or leg	15.55	NA	NA	8.62	8.82	2.47	NA	NA	26.64	26.84	090
64893		A	Nerve graft, arm or leg	16.68	NA	NA	9.32	9.75	2.61	NA	NA	28.61	29.04	090
64895		A	Nerve graft, hand or foot	20.20	NA	NA	9.73	9.69	2.57	NA	NA	32.50	32.46	090
64896		A	Nerve graft, hand or foot	21.75	NA	NA	11.49	11.13	3.16	NA	NA	36.40	36.04	090
64897		A	Nerve graft, arm or leg	19.19	NA	NA	10.05	10.55	2.54	NA	NA	31.78	32.28	090
64898		A	Nerve graft, arm or leg	20.76	NA	NA	10.88	11.59	2.77	NA	NA	34.41	35.12	090
64901		A	Nerve graft add-on	10.20	NA	NA	3.71	4.89	1.37	NA	NA	15.28	16.46	ZZZ
64902		A	Nerve graft add-on	11.81	NA	NA	4.14	5.52	1.55	NA	NA	17.50	18.88	ZZZ
64905		A	Nerve pedicle transfer	14.92	NA	NA	6.59	8.03	2.00	NA	NA	23.51	24.95	090
64907		A	Nerve pedicle transfer	19.84	NA	NA	6.14	10.96	3.16	NA	NA	29.14	33.96	090
65091		A	Revise eye	7.07	NA	NA	6.66	7.94	0.32	NA	NA	14.05	15.33	090
65093		A	Revise eye with implant	6.86	NA	NA	6.76	8.25	0.34	NA	NA	13.96	15.45	090
65101		A	Removal of eye	8.02	NA	NA	7.86	9.13	0.35	NA	NA	16.23	17.50	090
65103		A	Remove eye/insert implant	8.56	NA	NA	8.09	9.34	0.37	NA	NA	17.02	18.27	090
65105		A	Remove eye/attach implant	9.60	NA	NA	8.74	10.05	0.42	NA	NA	18.76	20.07	090
65110		A	Removal of eye	15.30	NA	NA	11.16	13.07	0.81	NA	NA	27.27	29.18	090
65112		A	Remove eye/revise socket	18.04	NA	NA	12.57	15.28	1.30	NA	NA	31.91	34.62	090
65114		A	Remove eye/revise socket	19.18	NA	NA	13.21	15.60	1.02	NA	NA	33.41	35.80	090
65125		A	Revise ocular implant	3.12	6.73	8.31	3.13	3.49	0.19	10.04	11.62	6.44	6.80	090
65130		A	Insert ocular implant	8.14	NA	NA	7.69	8.82	0.35	NA	NA	16.18	17.31	090
65135		A	Insert ocular implant	8.32	NA	NA	7.68	8.93	0.36	NA	NA	16.36	17.61	090
65140		A	Attach ocular implant	9.13	NA	NA	8.27	9.49	0.40	NA	NA	17.80	19.02	090
65150		A	Revise ocular implant	6.25	NA	NA	6.24	7.55	0.31	NA	NA	12.80	14.11	090
65155		A	Reinsert ocular implant	9.77	NA	NA	8.52	10.01	0.50	NA	NA	18.79	20.28	090
65175		A	Removal of ocular implant	7.14	NA	NA	7.03	8.13	0.31	NA	NA	14.48	15.58	090
65205		A	Remove foreign body from eye	0.71	0.57	0.62	0.32	0.30	0.03	1.31	1.36	1.06	1.04	000
65210		A	Remove foreign body from eye	0.84	0.72	0.79	0.39	0.38	0.04	1.60	1.67	1.27	1.26	000
65220		A	Remove foreign body from eye	0.71	0.59	0.63	0.28	0.28	0.05	1.35	1.39	1.04	1.04	000
65222		A	Remove foreign body from eye	0.93	0.79	0.87	0.42	0.39	0.04	1.76	1.84	1.39	1.36	000
65235		A	Remove foreign body from eye	8.68	NA	NA	6.44	6.68	0.37	NA	NA	15.49	15.73	090
65260		A	Remove foreign body from eye	12.19	NA	NA	8.59	9.41	0.57	NA	NA	21.35	22.17	090
65265		A	Remove foreign body from eye	13.94	NA	NA	9.40	10.34	0.62	NA	NA	23.96	24.90	090
65270		A	Repair of eye wound	1.90	3.76	4.87	1.16	1.33	0.09	5.75	6.86	3.15	3.32	010
65272		A	Repair of eye wound	4.43	6.23	7.36	3.10	3.25	0.19	10.85	11.98	7.72	7.87	090
65273		A	Repair of eye wound	4.97	NA	NA	3.30	3.52	0.22	NA	NA	8.49	8.71	090
65275		A	Repair of eye wound	6.08	6.21	6.30	3.82	3.92	0.26	12.55	12.64	10.16	0.26	090
65280		A	Repair of eye wound	8.77	NA	NA	5.65	6.10	0.38	NA	NA	14.80	15.25	090
65285		A	Repair of eye wound	14.31	NA	NA	8.19	8.98	0.64	NA	NA	23.14	23.93	090
65286		A	Repair of eye wound	6.37	8.69	10.55	4.34	4.56	0.27	15.33	17.19	10.98	11.20	090
65290		A	Repair of eye socket wound	6.27	NA	NA	4.36	4.65	0.31	NA	NA	10.94	11.23	090
65400		A	Removal of eye lesion	7.17	7.51	8.14	5.89	6.08	0.30	14.98	15.61	13.36	13.55	090
65410		A	Biopsy of cornea	1.47	1.69	2.01	0.87	0.95	0.07	3.23	3.55	2.41	2.49	000
65420		A	Removal of eye lesion	4.16	6.91	8.39	3.98	4.33	0.21	11.28	12.76	8.35	8.70	090
65426		A	Removal of eye lesion	5.85	8.26	9.72	4.60	4.85	0.25	14.36	15.82	10.70	10.95	090
65430		A	Corneal smear	1.47	1.10	1.24	0.87	0.95	0.07	2.64	2.78	2.41	2.49	000
65435		A	Curette/treat cornea	0.92	0.87	0.97	0.66	0.70	0.04	1.83	1.93	1.62	1.66	000
65436		A	Curette/treat cornea	4.68	3.79	4.02	3.46	3.63	0.21	8.68	8.91	8.35	8.52	090
65450		A	Treatment of corneal lesion	3.27	3.68	3.98	3.61	3.87	0.16	7.11	7.41	7.04	7.30	090
65600		A	Revision of cornea	4.01	4.43	4.87	3.43	3.38	0.17	8.61	9.05	7.61	7.56	090
65710		A	Corneal transplant	13.97	NA	NA	10.39	11.02	0.61	NA	NA	24.97	25.60	090
65730		A	Corneal transplant	15.87	NA	NA	10.90	11.76	0.70	NA	NA	27.47	28.33	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
65750		A	Corneal transplant	16.48	NA	NA	10.72	11.68	0.74	NA	NA	27.94	28.90	090
65755		A	Corneal transplant	16.37	NA	NA	10.69	11.61	0.73	NA	NA	27.79	28.71	090
65770		A	Revise cornea with implant	19.27	NA	NA	11.83	12.89	0.87	NA	NA	31.97	33.03	090
65772		A	Correction of astigmatism	4.90	4.89	5.39	3.95	4.09	0.21	10.00	10.50	9.06	9.20	090
65775		A	Correction of astigmatism	6.65	NA	NA	5.51	5.86	0.28	NA	NA	12.44	12.79	090
65780		A	Ocular reconst, transplant	10.23	NA	NA	8.98	9.99	0.44	NA	NA	19.65	20.66	090
65781		A	Ocular reconst, transplant	17.64	NA	NA	11.64	13.19	0.44	NA	NA	29.72	31.27	090
65782		A	Ocular reconst, transplant	14.98	NA	NA	10.27	11.58	0.44	NA	NA	25.69	27.00	090
65800		A	Drainage of eye	1.91	1.42	1.71	1.04	1.15	0.09	3.42	3.71	3.04	3.15	000
65805		A	Drainage of eye	1.91	1.72	2.07	1.04	1.15	0.09	3.72	4.07	3.04	3.15	000
65810		A	Drainage of eye	5.61	NA	NA	4.49	4.66	0.24	NA	NA	10.34	10.51	090
65815		A	Drainage of eye	5.79	7.92	9.50	4.56	4.76	0.25	13.96	15.54	10.60	10.80	090
65820		A	Relieve inner eye pressure	8.62	NA	NA	7.60	8.71	0.40	NA	NA	16.62	17.73	090
65850		A	Incision of eye	11.14	NA	NA	7.27	8.16	0.52	NA	NA	18.93	19.82	090
65855		A	Laser surgery of eye	3.84	3.52	4.12	2.64	2.99	0.19	7.55	8.15	6.67	7.02	010
65860		A	Incise inner eye adhesions	3.54	3.29	3.86	2.10	2.41	0.18	7.01	7.58	5.82	6.13	090
65865		A	Incise inner eye adhesions	5.59	NA	NA	4.77	5.42	0.28	NA	NA	10.64	11.29	090
65870		A	Incise inner eye adhesions	7.13	NA	NA	5.79	6.27	0.31	NA	NA	13.23	13.71	090
65875		A	Incise inner eye adhesions	7.53	NA	NA	6.20	6.66	0.32	NA	NA	14.05	14.51	090
65880		A	Incise inner eye adhesions	8.08	NA	NA	6.41	6.89	0.35	NA	NA	14.84	15.32	090
65900		A	Remove eye lesion	12.16	NA	NA	9.00	9.96	0.54	NA	NA	21.70	22.66	090
65920		A	Remove implant of eye	9.64	NA	NA	7.50	8.02	0.41	NA	NA	17.55	18.07	090
65930		A	Remove blood clot from eye	8.18	NA	NA	6.02	6.64	0.37	NA	NA	14.57	15.19	090
66020		A	Injection treatment of eye	1.59	2.44	2.96	1.28	1.40	0.08	4.11	4.63	2.95	3.07	010
66030		A	Injection treatment of eye	1.25	2.32	2.81	1.16	1.25	0.06	3.63	4.12	2.47	2.56	010
66130		A	Remove eye lesion	7.68	7.41	9.09	4.79	5.42	0.38	15.47	17.15	12.85	13.48	090
66150		A	Glaucoma surgery	10.04	NA	NA	8.78	9.27	0.46	NA	NA	19.28	19.77	090
66155		A	Glaucoma surgery	10.03	NA	NA	8.77	9.23	0.41	NA	NA	19.21	19.67	090
66160		A	Glaucoma surgery	11.90	NA	NA	9.50	10.04	0.50	NA	NA	21.90	22.44	090
66165		A	Glaucoma surgery	9.75	NA	NA	8.72	9.13	0.40	NA	NA	18.87	19.28	090
66170		A	Glaucoma surgery	14.39	NA	NA	11.45	12.06	0.60	NA	NA	26.44	27.05	090
66172		A	Incision of eye	18.02	NA	NA	14.39	15.03	0.74	NA	NA	33.15	33.79	090
66180		A	Implant eye shunt	15.90	NA	NA	9.74	10.53	0.71	NA	NA	26.35	27.14	090
66185		A	Revise eye shunt	9.25	NA	NA	7.20	7.35	0.40	NA	NA	16.85	17.00	090
66220		A	Repair eye lesion	8.88	NA	NA	6.86	7.06	0.40	NA	NA	16.14	16.34	090
66225		A	Repair/graft eye lesion	12.28	NA	NA	8.22	8.63	0.55	NA	NA	21.05	21.46	090
66250		A	Follow-up surgery of eye	6.84	9.23	11.10	5.21	5.43	0.30	16.37	18.24	12.35	12.57	090
66500		A	Incision of iris	3.70	NA	NA	3.87	4.46	0.18	NA	NA	7.75	8.34	090
66505		A	Incision of iris	4.07	NA	NA	4.20	4.80	0.20	NA	NA	8.47	9.07	090
66600		A	Remove iris and lesion	9.79	NA	NA	8.16	8.22	0.43	NA	NA	18.38	18.44	090
66505		A	Removal of iris	13.89	NA	NA	9.29	9.86	0.77	NA	NA	23.95	24.52	090
66625		A	Removal of iris	12	NA	NA	4.15	4.59	0.26	NA	NA	9.53	9.97	090
66630		A	Removal of iris	7.02	NA	NA	5.30	5.62	0.31	NA	NA	12.63	12.95	090
66635		A	Removal of iris	7.11	NA	NA	5.33	5.65	0.31	NA	NA	12.75	13.07	090
66680		A	Repair iris & ciliary body	6.18	NA	NA	5.18	5.26	0.27	NA	NA	11.63	11.71	090
66682		A	Repair iris & ciliary body	7.07	NA	NA	6.64	6.63	0.31	NA	NA	14.02	14.01	090
66700		A	Destruction, ciliary body	5.02	4.78	5.14	3.60	3.86	0.24	10.04	10.40	8.86	9.12	090
66710		A	Ciliary transscleral therapy	5.02	4.47	5.00	3.51	3.77	0.23	9.72	10.25	8.76	9.02	090
66711		A	Ciliary endoscopic ablation	7.60	NA	NA	6.22	6.42	0.30	NA	NA	14.12	14.32	090
66720		A	Destruction, ciliary body	4.77	5.21	5.66	4.20	4.60	0.26	10.24	10.69	9.23	9.63	090
66740		A	Destruction, ciliary body	5.02	4.49	4.95	3.61	3.89	0.23	9.74	10.20	8.86	9.14	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
66761		A	Revision of iris	4.81	4.99	5.46	4.19	4.29	0.20	10.00	10.47	9.20	9.30	090
66762		A	Revision of iris	5.19	5.07	5.52	4.07	4.24	0.23	10.49	10.94	9.49	9.66	090
66770		A	Removal of inner eye lesion	5.92	5.51	5.95	4.60	4.76	0.26	11.69	12.13	10.78	10.94	090
66820		A	Incision, secondary cataract	3.88	NA	NA	4.59	5.52	0.19	NA	NA	8.66	9.59	090
66821		A	After cataract laser surgery	3.28	3.89	4.05	3.46	3.59	0.11	7.28	7.44	6.85	6.98	090
66825		A	Reposition intraocular lens	8.72	NA	NA	7.61	8.72	0.40	NA	NA	16.73	17.84	090
66830		A	Removal of lens lesion	9.19	NA	NA	6.42	6.83	0.36	NA	NA	15.97	16.38	090
66840		A	Removal of lens material	8.90	NA	NA	6.37	6.75	0.39	NA	NA	15.66	16.04	090
66850		A	Removal of lens material	10.22	NA	NA	7.12	7.53	0.45	NA	NA	17.79	18.20	090
66852		A	Removal of lens material	11.08	NA	NA	7.44	7.95	0.49	NA	NA	19.01	19.52	090
66920		A	Extraction of lens	9.85	NA	NA	6.71	7.17	0.44	NA	NA	17.00	17.46	090
66930		A	Extraction of lens	11.28	NA	NA	7.52	8.00	0.49	NA	NA	19.29	19.77	090
66940		A	Extraction of lens	10.04	NA	NA	7.06	7.48	0.43	NA	NA	17.53	17.95	090
66982		A	Cataract surgery, complex	14.73	NA	NA	9.07	9.69	0.63	NA	NA	24.43	25.05	090
66983		A	Cataract surg w/iol, 1 stage	10.10	NA	NA	6.14	6.13	0.14	NA	NA	16.38	16.37	090
66984		A	Cataract surg w/iol, 1 stage	10.28	NA	NA	6.46	7.20	0.39	NA	NA	17.13	17.87	090
66985		A	Insert lens prosthesis	9.63	NA	NA	7.11	7.38	0.36	NA	NA	17.10	17.37	090
66986		A	Exchange lens prosthesis	12.26	NA	NA	8.00	8.90	0.60	NA	NA	20.86	21.76	090
66990		A	Ophthalmic endoscope add-on	1.51	NA	NA	0.55	0.66	0.07	NA	NA	2.13	2.24	ZZZ
67005		A	Partial removal of eye fluid	5.69	NA	NA	4.37	4.75	0.28	NA	NA	10.34	10.72	090
67010		A	Partial removal of eye fluid	6.86	NA	NA	4.79	5.27	0.34	NA	NA	11.99	12.47	090
67015		A	Release of eye fluid	6.91	NA	NA	5.54	6.24	0.34	NA	NA	12.79	13.49	090
67025		A	Replace eye fluid	7.83	7.81	8.89	5.87	6.15	0.34	15.98	17.06	14.04	14.32	090
67027		A	Implant eye drug system	11.33	NA	NA	7.30	7.84	0.54	NA	NA	19.17	19.71	090
67028		A	Injection eye drug	2.52	2.16	2.57	1.26	1.41	0.12	4.80	5.21	3.90	4.05	000
67030		A	Incise inner eye strands	5.83	NA	NA	5.48	5.77	0.24	NA	NA	11.55	11.84	090
67031		A	Laser surgery, eye strands	4.28	4.03	4.47	3.42	3.59	0.18	8.49	8.93	7.88	8.05	090
67036		A	Removal of inner eye fluid	12.99	NA	NA	8.24	8.92	0.58	NA	NA	21.81	22.49	090
67038		A	Strip retinal membrane	23.14	NA	NA	13.80	15.10	1.04	NA	NA	37.98	39.28	090
67039		A	Laser treatment of retina	16.25	NA	NA	11.05	11.93	0.71	NA	NA	28.01	28.89	090
67040		A	Laser treatment of retina	19.07	NA	NA	12.34	13.38	0.85	NA	NA	32.26	33.30	090
67101		A	Repair detached retina	8.52	8.45	8.98	6.13	6.45	0.37	17.34	17.87	15.02	15.34	090
67105		A	Repair detached retina	8.27	7.37	7.92	5.76	6.07	0.37	16.01	16.56	14.40	14.71	090
67107		A	Repair detached retina	16.26	NA	NA	10.36	11.09	0.73	NA	NA	27.35	28.08	090
67108		A	Repair detached retina	22.39	NA	NA	12.97	14.09	1.02	NA	NA	36.38	37.50	090
67110		A	Repair detached retina	9.92	8.88	9.92	6.92	7.29	0.44	19.24	20.28	17.28	17.65	090
67112		A	Rerepair detached retina	18.33	NA	NA	10.82	11.59	0.83	NA	NA	29.98	30.75	090
67115		A	Release encircling material	5.85	NA	NA	4.87	5.04	0.25	NA	NA	10.97	11.14	090
67120		A	Remove eye implant material	6.84	7.31	8.28	5.24	5.47	0.29	14.44	15.41	12.37	12.60	090
67121		A	Remove eye implant material	11.90	NA	NA	7.92	8.39	0.53	NA	NA	20.35	20.82	090
67141		A	Treatment of retina	5.94	5.37	5.75	4.63	4.81	0.26	11.57	11.95	10.83	11.01	090
67145		A	Treatment of retina	6.11	5.29	5.63	4.68	4.88	0.27	11.67	12.01	11.06	11.26	090
67208		A	Treatment of retinal lesion	7.44	5.60	6.01	5.18	5.44	0.33	13.37	13.78	12.95	13.21	090
67210		A	Treatment of retinal lesion	9.31	5.73	6.38	5.27	5.74	0.44	15.48	16.13	15.02	15.49	090
67218		A	Treatment of retinal lesion	20.14	NA	NA	10.59	11.79	0.92	NA	NA	31.65	32.85	090
67220		A	Treatment of choroid lesion	14.11	9.19	10.14	8.15	8.82	0.65	23.95	24.90	22.91	23.58	090
67221		R	Ocular photodynamic ther	3.45	2.96	4.00	1.40	1.71	0.20	6.61	7.65	5.05	5.36	000
67225		A	Eye photodynamic ther add-on	0.47	0.23	0.25	0.17	0.20	0.02	0.72	0.74	0.66	0.69	ZZZ
67227		A	Treatment of retinal lesion	7.32	5.96	6.44	5.13	5.44	0.33	13.61	14.09	12.78	13.09	090
67228		A	Treatment of retinal lesion	13.59	9.99	11.13	7.68	8.34	0.63	24.21	25.35	21.90	22.56	090
67250		A	Reinforce eye wall	9.40	NA	NA	7.57	8.79	0.47	NA	NA	17.44	18.66	090
67255		A	Reinforce/graft eye wall	9.89	NA	NA	8.31	9.52	0.44	NA	NA	18.64	19.85	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
67311		A	Revise eye muscle	7.51	NA	NA	5.58	5.93	0.37	NA	NA	13.46	13.81	090
67312		A	Revise two eye muscles	9.40	NA	NA	6.20	6.63	0.43	NA	NA	16.03	16.46	090
67314		A	Revise eye muscle	8.51	NA	NA	6.15	6.47	0.39	NA	NA	15.05	15.37	090
67316		A	Revise two eye muscles	10.65	NA	NA	6.93	7.37	0.49	NA	NA	18.07	18.51	090
67318		A	Revise eye muscle(s)	8.84	NA	NA	6.53	6.85	0.41	NA	NA	15.78	16.10	090
67320		A	Revise eye muscle(s) add-on	4.32	NA	NA	1.56	1.86	0.22	NA	NA	6.10	6.40	ZZZ
67331		A	Eye surgery follow-up add-on	4.05	NA	NA	1.46	1.75	0.21	NA	NA	5.72	6.01	ZZZ
67332		A	Rerevise eye muscles add-on	4.48	NA	NA	1.62	1.93	0.23	NA	NA	6.33	6.64	ZZZ
67334		A	Revise eye muscle w/suture	3.97	NA	NA	1.42	1.71	0.20	NA	NA	5.59	5.88	ZZZ
67335		A	Eye suture during surgery	2.49	NA	NA	0.90	1.07	0.13	NA	NA	3.52	3.69	ZZZ
67340		A	Revise eye muscle add-on	4.92	NA	NA	1.77	2.10	0.25	NA	NA	6.94	7.27	ZZZ
67343		A	Release eye tissue	8.21	NA	NA	6.05	6.41	0.37	NA	NA	14.63	14.99	090
67345		A	Destroy nerve of eye muscle	2.96	2.23	2.50	1.73	1.95	0.17	5.36	5.63	4.86	5.08	010
67350		A	Biopsy eye muscle	2.87	NA	NA	1.64	1.82	0.15	NA	NA	4.66	4.84	000
67400		A	Explore/biopsy eye socket	10.87	NA	NA	9.25	10.78	0.56	NA	NA	20.68	22.21	090
67405		A	Explore/drain eye socket	8.92	NA	NA	8.09	9.37	0.44	NA	NA	17.45	18.73	090
67412		A	Explore/treat eye socket	10.11	NA	NA	8.50	10.35	0.48	NA	NA	19.09	20.94	090
67413		A	Explore/treat eye socket	9.99	NA	NA	8.48	10.22	0.50	NA	NA	18.97	20.71	090
67414		A	Explr/decompress eye socket	17.72	NA	NA	11.56	11.94	0.65	NA	NA	29.93	30.31	090
67415		A	Aspiration, orbital contents	1.76	NA	NA	0.61	0.72	0.09	NA	NA	2.46	2.57	000
67420		A	Explore/treat eye socket	21.52	NA	NA	13.96	16.57	1.15	NA	NA	36.63	39.24	090
67430		A	Explore/treat eye socket	14.87	NA	NA	12.07	14.22	0.86	NA	NA	27.80	29.95	090
67440		A	Explore/drain eye socket	14.44	NA	NA	11.56	13.62	0.70	NA	NA	26.70	28.76	090
67445		A	Explr/decompress eye socket	18.90	NA	NA	12.47	13.58	0.90	NA	NA	32.27	33.38	090
67450		A	Explore/biopsy eye socket	14.99	NA	NA	12.01	14.05	0.68	NA	NA	27.68	29.72	090
67500		A	Inject/treat eye socket	1.44	0.60	0.65	0.46	0.33	0.05	2.09	2.14	1.95	1.82	000
67505		A	Inject/treat eye socket	1.27	0.52	0.65	0.39	0.33	0.05	1.84	1.97	1.71	1.65	000
67515		A	Inject/treat eye socket	1.40	0.78	0.64	0.62	0.44	0.03	2.21	2.07	2.05	1.87	000
67550		A	Insert eye socket implant	11.42	NA	NA	9.53	10.88	0.72	NA	NA	21.67	23.02	090
67560		A	Revise eye socket implant	11.83	NA	NA	9.57	10.94	0.60	NA	NA	22.00	23.37	090
67570		A	Decompress optic nerve	14.13	NA	NA	10.87	12.93	0.68	NA	NA	25.68	27.74	090
67700		A	Drainage of eyelid abscess	1.35	4.36	5.62	1.19	1.25	0.07	5.78	7.04	2.61	2.67	010
67710		A	Incision of eyelid	1.02	3.74	4.98	1.08	1.18	0.05	4.81	6.05	2.15	2.25	010
67715		A	Incision of eyelid fold	1.22	3.85	5.01	1.16	1.26	0.06	5.13	6.29	2.44	2.54	010
67800		A	Remove eyelid lesion	1.38	1.41	1.57	0.91	1.01	0.07	2.86	3.02	2.36	2.46	010
67801		A	Remove eyelid lesions	1.88	1.69	1.90	1.09	1.22	0.09	3.66	3.87	3.06	3.19	010
67805		A	Remove eyelid lesions	2.22	2.21	2.45	1.42	1.59	0.11	4.54	4.78	3.75	3.92	010
67808		A	Remove eyelid lesion(s)	4.41	NA	NA	3.62	3.74	0.19	NA	NA	8.22	8.34	090
67810		A	Biopsy of eyelid	1.48	3.86	3.47	0.66	0.68	0.06	5.40	5.01	2.20	2.22	000
67820		A	Revise eyelashes	0.71	0.44	0.56	0.51	0.55	0.04	1.19	1.31	1.26	1.30	000
67825		A	Revise eyelashes	1.38	1.41	1.66	1.27	1.38	0.07	2.86	3.11	2.72	2.83	010
67830		A	Revise eyelashes	1.70	4.04	5.17	1.33	1.46	0.08	5.82	6.95	3.11	3.24	010
67835		A	Revise eyelashes	5.55	NA	NA	4.04	4.48	0.28	NA	NA	9.87	10.31	090
67840		A	Remove eyelid lesion	2.04	3.94	5.10	1.46	1.60	0.10	6.08	7.24	3.60	3.74	010
67850		A	Treat eyelid lesion	1.69	3.24	3.35	1.42	1.46	0.07	5.00	5.11	3.18	3.22	010
67875		A	Closure of eyelid by suture	1.35	2.40	3.08	0.84	0.92	0.07	3.82	4.50	2.26	2.34	000
67880		A	Revision of eyelid	4.41	5.47	6.34	3.59	3.76	0.19	10.07	10.94	8.19	8.36	090
67882		A	Revision of eyelid	5.81	6.43	7.35	4.51	4.74	0.25	12.49	13.41	10.57	10.80	090
67900		A	Repair brow defect	6.63	7.38	8.66	4.60	5.10	0.38	14.39	15.67	11.61	12.11	090
67901		A	Repair eyelid defect	7.39	NA	NA	5.18	5.36	0.54	NA	NA	13.11	13.29	090
67902		A	Repair eyelid defect	9.60	NA	NA	6.31	5.69	0.60	NA	NA	16.51	15.89	090
67903		A	Repair eyelid defect	6.36	6.68	8.86	4.36	5.24	0.47	13.51	15.69	11.19	12.07	090

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CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
67904		A	Repair eyelid defect	7.75	7.99	9.24	5.11	5.22	0.41	16.15	17.40	13.27	13.38	090
67906		A	Repair eyelid defect	6.78	3.91	5.02	4.52	4.91	0.46	11.15	12.26	11.76	12.15	090
67908		A	Repair eyelid defect	5.12	5.47	6.36	4.08	5.04	0.28	10.87	11.76	9.48	10.44	090
67909		A	Revise eyelid defect	5.39	6.26	7.60	4.22	4.78	0.31	11.96	13.30	9.92	10.48	090
67911		A	Revise eyelid defect	7.30	NA	NA	4.89	4.82	0.31	NA	NA	12.50	12.43	090
67912		A	Correction eyelid w/implant	6.17	12.98	17.48	4.64	5.32	0.28	19.43	23.93	11.09	11.77	090
67914		A	Repair eyelid defect	3.67	4.79	5.97	2.70	2.97	0.19	8.65	9.83	6.56	6.83	090
67915		A	Repair eyelid defect	3.18	4.46	5.62	2.51	2.74	0.16	7.80	8.96	5.85	6.08	090
67916		A	Repair eyelid defect	5.30	6.40	7.65	4.16	4.62	0.28	11.98	13.23	9.74	10.20	090
67917		A	Repair eyelid defect	6.01	6.78	8.06	4.43	4.92	0.36	13.15	14.43	10.80	11.29	090
67921		A	Repair eyelid defect	3.39	4.67	5.83	2.58	2.82	0.17	8.23	9.39	6.14	6.38	090
67922		A	Repair eyelid defect	3.06	4.36	5.54	2.45	2.68	0.15	7.57	8.75	5.66	5.89	090
67923		A	Repair eyelid defect	5.87	6.50	7.73	4.36	4.83	0.30	12.67	13.90	10.53	11.00	090
67924		A	Repair eyelid defect	5.78	6.98	8.46	4.09	4.54	0.30	13.06	14.54	10.17	10.62	090
67930		A	Repair eyelid wound	3.60	4.41	5.40	1.79	2.08	0.19	8.20	9.19	5.58	5.87	010
67935		A	Repair eyelid wound	6.21	6.82	8.11	3.61	4.22	0.39	13.42	14.71	10.21	10.82	090
67938		A	Remove eyelid foreign body	1.33	3.90	5.03	1.24	1.26	0.06	5.29	6.42	2.63	2.65	010
67950		A	Revision of eyelid	5.81	6.67	8.16	4.37	5.02	0.36	12.84	14.33	10.54	11.19	090
67961		A	Revision of eyelid	5.68	6.87	8.25	4.33	4.86	0.33	12.88	14.26	10.34	10.87	090
67966		A	Revision of eyelid	8.75	8.02	8.88	5.43	5.54	0.37	17.14	18.00	14.55	14.66	090
67971		A	Reconstruction of eyelid	9.78	NA	NA	6.23	7.03	0.53	NA	NA	16.54	17.34	090
67973		A	Reconstruction of eyelid	12.85	NA	NA	7.81	8.96	0.75	NA	NA	21.41	22.56	090
67974		A	Reconstruction of eyelid	12.82	NA	NA	7.83	8.90	0.75	NA	NA	21.40	22.47	090
67975		A	Reconstruction of eyelid	9.12	NA	NA	6.01	6.73	0.50	NA	NA	15.63	16.35	090
68020		A	Incise/drain eyelid lining	1.37	1.25	1.37	1.06	1.17	0.06	2.68	2.80	2.49	2.60	010
68040		A	Treatment of eyelid lesions	0.85	0.61	0.69	0.35	0.41	0.04	1.50	1.58	1.24	1.30	000
68100		A	Biopsy of eyelid lining	1.35	2.37	3.04	0.86	0.93	0.07	3.79	4.46	2.28	2.35	000
68110		A	Remove eyelid lining lesion	1.77	3.10	3.86	1.49	1.61	0.09	4.96	5.72	3.35	3.47	010
68115		A	Remove eyelid lining lesion	2.36	4.37	5.58	1.70	1.87	0.12	6.85	8.06	4.18	4.35	010
68130		A	Remove eyelid lining lesion	4.92	6.74	8.24	4.09	4.48	0.24	11.90	13.40	9.25	9.64	090
68135		A	Remove eyelid lining lesion	1.84	1.60	1.77	1.48	1.61	0.09	3.53	3.70	3.41	3.54	010
68200		A	Treat eyelid by injection	0.49	0.45	0.52	0.29	0.32	0.02	0.96	1.03	0.80	0.83	000
68320		A	Revise/graft eyelid lining	6.36	9.25	10.80	5.35	5.49	0.27	15.88	17.43	11.98	12.12	090
68325		A	Revise/graft eyelid lining	8.35	NA	NA	6.02	6.43	0.44	NA	NA	14.81	15.22	090
68326		A	Revise/graft eyelid lining	8.14	NA	NA	5.97	6.32	0.35	NA	NA	14.46	14.81	090
68328		A	Revise/graft eyelid lining	9.17	NA	NA	6.50	7.11	0.54	NA	NA	16.21	16.82	090
68330		A	Revise eyelid lining	5.57	7.50	8.96	4.49	4.67	0.24	13.31	14.77	10.30	10.48	090
68335		A	Revise/graft eyelid lining	8.18	NA	NA	5.98	6.30	0.36	NA	NA	14.52	14.84	090
68340		A	Separate eyelid adhesions	4.78	6.94	8.41	3.90	4.06	0.21	11.93	13.40	8.89	9.05	090
68360		A	Revise eyelid lining	4.98	6.48	7.67	3.98	4.14	0.22	11.68	12.87	9.18	9.34	090
68362		A	Revise eyelid lining	8.33	NA	NA	6.03	6.32	0.36	NA	NA	14.72	15.01	090
68371		A	Harvest eye tissue, alograft	4.89	NA	NA	4.09	4.58	0.44	NA	NA	9.42	9.91	010
68400		A	Incise/drain tear gland	1.69	4.30	5.52	1.16	1.66	0.08	6.07	7.29	2.93	3.43	010
68420		A	Incise/drain tear sac	2.30	4.55	5.80	1.39	1.93	0.11	6.96	8.21	3.80	4.34	010
68440		A	Incise tear duct opening	0.94	1.18	1.86	1.15	1.24	0.05	2.17	2.85	2.14	2.23	010
68500		A	Removal of tear gland	12.37	NA	NA	8.65	9.48	0.55	NA	NA	21.57	22.40	090
68505		A	Partial removal, tear gland	12.29	NA	NA	8.78	10.21	0.55	NA	NA	21.62	23.05	090
68510		A	Biopsy of tear gland	4.60	5.23	6.82	2.04	2.09	0.23	10.06	11.65	6.87	6.92	000
68520		A	Removal of tear sac	8.50	NA	NA	6.56	7.22	0.37	NA	NA	15.43	16.09	090
68525		A	Biopsy of tear sac	4.42	NA	NA	1.58	1.92	0.22	NA	NA	6.22	6.56	000
68530		A	Clearance of tear duct	3.65	5.57	7.54	2.05	2.50	0.18	9.40	11.37	5.88	6.33	010

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
68540		A	Remove tear gland lesion	11.83	NA	NA	8.28	9.14	0.52	NA	NA	20.63	21.49	090
68550		A	Remove tear gland lesion	14.74	NA	NA	9.99	11.03	0.80	NA	NA	25.53	26.57	090
68700		A	Repair tear ducts	7.59	NA	NA	5.60	5.90	0.32	NA	NA	13.51	13.81	090
68705		A	Revise tear duct opening	2.06	3.06	3.90	1.60	1.75	0.10	5.22	6.06	3.76	3.91	010
68720		A	Create tear sac drain	9.70	NA	NA	6.86	7.63	0.44	NA	NA	17.00	17.77	090
68745		A	Create tear duct drain	9.62	NA	NA	7.21	7.71	0.52	NA	NA	17.35	17.85	090
68750		A	Create tear duct drain	9.77	NA	NA	7.38	8.06	0.43	NA	NA	17.58	18.26	090
68760		A	Close tear duct opening	1.73	2.62	3.32	1.47	1.59	0.09	4.44	5.14	3.29	3.41	010
68761		A	Close tear duct opening	1.36	1.85	2.17	1.26	1.31	0.06	3.27	3.59	2.68	2.73	010
68770		A	Close tear system fistula	8.01	2.90	3.12	5.74	3.83	0.35	11.26	11.48	14.10	12.19	090
68801		A	Dilate tear duct opening	0.94	1.79	1.91	1.43	1.47	0.05	2.78	2.90	2.42	2.46	010
68810		A	Probe nasolacrimal duct	2.59	3.42	3.61	2.70	2.69	0.10	6.11	6.30	5.39	5.38	010
68811		A	Probe nasolacrimal duct	2.35	NA	NA	2.13	2.35	0.13	NA	NA	4.61	4.83	010
68815		A	Probe nasolacrimal duct	3.20	6.46	7.81	2.44	2.73	0.17	9.83	11.18	5.81	6.10	010
68840		A	Explore/irrigate tear ducts	1.25	1.32	1.53	1.09	1.11	0.06	2.63	2.84	2.40	2.42	010
68850		A	Injection for tear sac x-ray	0.80	0.74	0.85	0.61	0.66	0.04	1.58	1.69	1.45	1.50	000
69000		A	Drain external ear lesion	1.45	2.67	2.84	1.23	1.33	0.12	4.24	4.41	2.80	2.90	010
69005		A	Drain external ear lesion	2.11	2.71	2.88	1.43	1.74	0.17	4.99	5.16	3.71	4.02	010
69020		A	Drain outer ear canal lesion	1.48	3.80	3.95	1.74	1.99	0.12	5.40	5.55	3.34	3.59	010
69100		A	Biopsy of external ear	0.81	1.82	1.74	0.38	0.39	0.03	2.66	2.58	1.22	1.23	000
69105		A	Biopsy of external ear canal	0.85	2.46	2.38	0.64	0.74	0.07	3.38	3.30	1.56	1.66	000
69110		A	Remove external ear, partial	3.43	7.49	6.94	4.22	4.42	0.30	11.22	10.67	7.95	8.15	090
69120		A	Removal of external ear	4.04	NA	NA	5.01	5.90	0.38	NA	NA	9.43	10.32	090
69140		A	Remove ear canal lesion(s)	7.96	NA	NA	12.17	13.03	0.65	NA	NA	20.78	21.64	090
69145		A	Remove ear canal lesion(s)	2.62	6.47	5.97	3.06	3.25	0.21	9.30	8.80	5.89	6.08	090
69150		A	Extensive ear canal surgery	13.41	NA	NA	10.38	12.68	1.22	NA	NA	25.01	27.31	090
69155		A	Extensive ear/neck surgery	22.96	NA	NA	14.75	18.39	1.92	NA	NA	39.63	43.27	090
69200		A	Clear outer ear canal	0.77	2.02	2.30	0.56	0.55	0.06	2.85	3.13	1.39	1.38	000
69205		A	Clear outer ear canal	1.20	NA	NA	1.12	1.30	0.10	NA	NA	2.42	2.60	010
69210		A	Remove impacted ear wax	0.61	0.55	0.61	0.15	0.21	0.05	1.21	1.27	0.81	0.87	000
69220		A	Clean out mastoid cavity	0.83	2.35	2.37	0.60	0.70	0.07	3.25	3.27	1.50	1.60	000
69222		A	Clean out mastoid cavity	1.40	3.63	3.80	1.71	1.98	0.12	5.15	5.32	3.23	3.50	010
69300		R	Revise external ear	6.35	NA	NA	4.44	4.28	0.72	NA	NA	11.51	11.35	YYY
69310		A	Rebuild outer ear canal	10.77	NA	NA	14.02	15.75	0.85	NA	NA	25.64	27.37	090
69320		A	Rebuild outer ear canal	16.93	NA	NA	17.92	20.91	1.37	NA	NA	36.22	39.21	090
69400		A	Inflate middle ear canal	0.83	2.58	2.27	0.61	0.66	0.07	3.48	3.17	1.51	1.56	000
69401		A	Inflate middle ear canal	0.63	1.45	1.29	0.55	0.63	0.05	2.13	1.97	1.23	1.31	000
69405		A	Catheterize middle ear canal	2.63	3.34	3.47	1.75	2.18	0.21	6.18	6.31	4.59	5.02	010
69420		A	Incision of eardrum	1.33	3.02	3.13	1.39	1.54	0.11	4.46	4.57	2.83	2.98	010
69421		A	Incision of eardrum	1.73	NA	NA	1.66	2.04	0.15	NA	NA	3.54	3.92	010
69424		A	Remove ventilating tube	0.85	2.15	2.18	0.61	0.66	0.07	3.07	3.10	1.53	1.58	000
69433		A	Create eardrum opening	1.52	3.02	3.08	1.42	1.59	0.13	4.67	4.73	3.07	3.24	010
69436		A	Create eardrum opening	1.96	NA	NA	1.70	2.15	0.19	NA	NA	3.85	4.30	010
69440		A	Exploration of middle ear	7.56	NA	NA	8.20	8.65	0.61	NA	NA	16.37	16.82	090
69450		A	Eardrum revision	5.56	NA	NA	6.88	7.01	0.45	NA	NA	12.89	13.02	090
69501		A	Mastoidectomy	9.06	NA	NA	7.69	8.70	0.73	NA	NA	17.48	18.49	090
69502		A	Mastoidectomy	12.36	NA	NA	9.87	11.18	1.00	NA	NA	23.23	24.54	090
69505		A	Remove mastoid structures	12.97	NA	NA	14.57	16.57	1.05	NA	NA	28.59	30.59	090
69511		A	Extensive mastoid surgery	13.50	NA	NA	14.69	16.81	1.09	NA	NA	29.28	31.40	090
69530		A	Extensive mastoid surgery	20.15	NA	NA	17.72	20.70	1.54	NA	NA	39.41	42.39	090
69535		A	Remove part of temporal bone	37.17	NA	NA	23.79	29.99	2.92	NA	NA	63.88	70.08	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
69540		A	Remove ear lesion	1.20	3.58	3.71	1.68	1.91	0.10	4.88	5.01	2.98	3.21	010
69550		A	Remove ear lesion	10.97	NA	NA	12.90	14.40	0.89	NA	NA	24.76	26.26	090
69552		A	Remove ear lesion	19.61	NA	NA	16.31	19.63	1.59	NA	NA	37.51	40.83	090
69554		A	Remove ear lesion	35.63	NA	NA	22.05	28.33	2.91	NA	NA	60.59	66.87	090
69601		A	Mastoid surgery revision	13.22	NA	NA	10.68	12.20	1.07	NA	NA	24.97	26.49	090
69602		A	Mastoid surgery revision	13.56	NA	NA	11.39	12.80	1.10	NA	NA	26.05	27.46	090
69603		A	Mastoid surgery revision	14.00	NA	NA	14.84	17.52	1.14	NA	NA	29.98	32.66	090
69604		A	Mastoid surgery revision	14.00	NA	NA	11.50	13.17	1.14	NA	NA	26.64	28.31	090
69605		A	Mastoid surgery revision	18.46	NA	NA	17.26	20.07	1.50	NA	NA	37.22	40.03	090
69610		A	Repair of eardrum	4.42	4.41	5.28	2.26	3.03	0.36	9.19	10.06	7.04	7.81	010
69620		A	Repair of eardrum	5.88	9.93	10.85	5.21	6.04	0.48	16.29	17.21	11.57	12.40	090
69631		A	Repair eardrum structures	9.85	NA	NA	10.36	11.01	0.80	NA	NA	21.01	21.66	090
69632		A	Rebuild eardrum structures	12.73	NA	NA	11.92	13.11	1.03	NA	NA	25.68	26.87	090
69633		A	Rebuild eardrum structures	12.08	NA	NA	11.75	12.76	0.98	NA	NA	24.81	25.82	090
69635		A	Repair eardrum structures	13.31	NA	NA	14.64	16.25	1.08	NA	NA	29.03	30.64	090
69636		A	Rebuild eardrum structures	15.20	NA	NA	16.39	18.62	1.23	NA	NA	32.82	35.05	090
69637		A	Rebuild eardrum structures	15.09	NA	NA	16.37	18.55	1.22	NA	NA	32.68	34.86	090
69641		A	Revise middle ear & mastoid	12.69	NA	NA	11.15	12.40	1.03	NA	NA	24.87	26.12	090
69642		A	Revise middle ear & mastoid	16.81	NA	NA	13.84	15.71	1.36	NA	NA	32.01	33.88	090
69643		A	Revise middle ear & mastoid	15.36	NA	NA	12.63	14.30	1.24	NA	NA	29.23	30.90	090
69644		A	Revise middle ear & mastoid	17.00	NA	NA	16.86	19.56	1.37	NA	NA	35.23	37.93	090
69645		A	Revise middle ear & mastoid	16.48	NA	NA	16.78	19.26	1.33	NA	NA	34.59	37.07	090
69646		A	Revise middle ear & mastoid	18.14	NA	NA	17.19	19.91	1.46	NA	NA	36.79	39.51	090
69650		A	Release middle ear bone	9.65	NA	NA	8.53	9.59	0.78	NA	NA	18.96	20.02	090
69660		A	Revise middle ear bone	11.88	NA	NA	9.37	10.75	0.96	NA	NA	22.21	23.59	090
69661		A	Revise middle ear bone	15.72	NA	NA	11.98	14.05	1.27	NA	NA	28.97	31.04	090
69662		A	Revise middle ear bone	15.42	NA	NA	11.11	13.12	1.25	NA	NA	27.78	29.79	090
69666		A	Repair middle ear structures	9.74	NA	NA	8.79	9.70	0.79	NA	NA	19.32	20.23	090
69667		A	Repair middle ear structures	9.75	NA	NA	8.70	9.68	0.79	NA	NA	19.24	20.22	090
69670		A	Remove mastoid air cells	11.55	NA	NA	10.01	11.31	0.93	NA	NA	22.49	23.79	090
69676		A	Remove middle ear nerve	9.51	NA	NA	9.50	10.46	0.81	NA	NA	19.82	20.78	090
69700		A	Close mastoid fistula	8.22	NA	NA	7.54	8.84	0.67	NA	NA	16.43	17.73	090
69711		A	Remove/repair hearing aid	10.42	NA	NA	9.29	10.44	0.83	NA	NA	20.54	21.69	090
69714		A	Implant temple bone w/stimul	14.23	NA	NA	10.38	12.12	1.13	NA	NA	25.74	27.48	090
69715		A	Temple bne implnt w/stimulat	18.72	NA	NA	11.74	14.24	1.48	NA	NA	31.94	34.44	090
69717		A	Temple bone implant revision	15.21	NA	NA	11.34	13.72	0.90	NA	NA	27.45	29.83	090
69718		A	Revise temple bone implant	18.97	NA	NA	19.76	16.45	3.21	NA	NA	41.94	38.63	090
69720		A	Release facial nerve	14.48	NA	NA	12.56	14.06	1.16	NA	NA	28.20	29.70	090
69725		A	Release facial nerve	27.36	NA	NA	16.01	19.15	2.44	NA	NA	45.81	48.95	090
69740		A	Repair facial nerve	16.12	NA	NA	10.97	12.83	1.27	NA	NA	28.36	30.22	090
69745		A	Repair facial nerve	16.84	NA	NA	11.69	14.18	1.14	NA	NA	29.67	32.16	090
69801		A	Incise inner ear	8.55	NA	NA	8.63	9.28	0.69	NA	NA	17.87	18.52	090
69802		A	Incise inner ear	13.32	NA	NA	10.38	11.87	1.06	NA	NA	24.76	26.25	090
69805		A	Explore inner ear	14.49	NA	NA	9.64	11.34	1.12	NA	NA	25.25	26.95	090
69806		A	Explore inner ear	12.45	NA	NA	9.22	10.61	1.00	NA	NA	22.67	24.06	090
69820		A	Establish inner ear window	10.32	NA	NA	9.66	10.85	0.90	NA	NA	20.88	22.07	090
69840		A	Revise inner ear window	10.24	NA	NA	11.47	12.78	0.79	NA	NA	22.50	23.81	090
69905		A	Remove inner ear	11.08	NA	NA	9.94	11.02	0.90	NA	NA	21.92	23.00	090
69910		A	Remove inner ear & mastoid	13.73	NA	NA	9.64	11.37	1.07	NA	NA	24.44	26.17	090
69915		A	Incise inner ear nerve	22.56	NA	NA	13.10	15.66	1.69	NA	NA	37.35	39.91	090
69930		A	Implant cochlear device	17.54	NA	NA	11.62	14.00	1.36	NA	NA	30.52	32.90	090
69950		A	Incise inner ear nerve	27.38	NA	NA	14.99	17.96	2.28	NA	NA	44.65	47.62	090
69955		A	Release facial nerve	29.14	NA	NA	16.71	20.26	2.48	NA	NA	48.33	51.88	090

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
69960		A	Release inner ear canal	29.14	NA	NA	15.12	18.86	2.17	NA	NA	46.43	50.17	090
69970		A	Remove inner ear lesion	32.13	NA	NA	17.46	21.87	2.41	NA	NA	52.00	56.41	090
69990		R	Microsurgery add-on	3.46	NA	NA	1.24	1.66	0.89	NA	NA	5.59	6.01	ZZZ
70010		A	Contrast x-ray of brain	1.19	2.91	4.28	NA	NA	0.27	4.37	5.74	NA	NA	XXX
70010	26	A	Contrast x-ray of brain	1.19	0.41	0.40	0.41	0.40	0.05	1.65	1.64	1.65	1.64	XXX
70010	TC	A	Contrast x-ray of brain	0.00	2.50	3.88	NA	NA	0.22	2.72	4.10	NA	NA	XXX
70015		A	Contrast x-ray of brain	1.19	2.99	2.05	NA	NA	0.16	4.34	3.40	NA	NA	XXX
70015	26	A	Contrast x-ray of brain	1.19	0.42	0.40	0.42	0.40	0.08	1.69	1.67	1.69	1.67	XXX
70015	TC	A	Contrast x-ray of brain	0.00	2.57	1.66	NA	NA	0.08	2.65	1.74	NA	NA	XXX
70030		A	X-ray eye for foreign body	0.17	0.63	0.52	NA	NA	0.03	0.83	0.72	NA	NA	XXX
70030	26	A	X-ray eye for foreign body	0.17	0.06	0.06	0.06	0.06	0.01	0.24	0.24	0.24	0.24	XXX
70030	TC	A	X-ray eye for foreign body	0.00	0.57	0.46	NA	NA	0.02	0.59	0.48	NA	NA	XXX
70100		A	X-ray exam of jaw	0.18	0.65	0.60	NA	NA	0.03	0.86	0.81	NA	NA	XXX
70100	26	A	X-ray exam of jaw	0.18	0.05	0.06	0.05	0.06	0.01	0.24	0.25	0.24	0.25	XXX
70100	TC	A	X-ray exam of jaw	0.00	0.60	0.54	NA	NA	0.02	0.62	0.56	NA	NA	XXX
70110		A	X-ray exam of jaw	0.25	0.83	0.73	NA	NA	0.05	1.13	1.03	NA	NA	XXX
70110	26	A	X-ray exam of jaw	0.25	0.08	0.08	0.08	0.08	0.01	0.34	0.34	0.34	0.34	XXX
70110	TC	A	X-ray exam of jaw	0.00	0.75	0.65	NA	NA	0.04	0.79	0.69	NA	NA	XXX
70120		A	X-ray exam of mastoids	0.18	0.71	0.69	NA	NA	0.05	0.94	0.92	NA	NA	XXX
70120	26	A	X-ray exam of mastoids	0.18	0.05	0.06	0.05	0.06	0.01	0.24	0.25	0.24	0.25	XXX
70120	TC	A	X-ray exam of mastoids	0.00	0.65	0.63	NA	NA	0.04	0.69	0.67	NA	NA	XXX
70130		A	X-ray exam of mastoids	0.34	1.19	0.97	NA	NA	0.07	1.60	1.38	NA	NA	XXX
70130	26	A	X-ray exam of mastoids	0.34	0.11	0.11	0.11	0.11	0.02	0.47	0.47	0.47	0.47	XXX
70130	TC	A	X-ray exam of mastoids	0.00	1.08	0.86	NA	NA	0.05	1.13	0.91	NA	NA	XXX
70134		A	X-ray exam of middle ear	0.34	0.96	0.87	NA	NA	0.07	1.37	1.28	NA	NA	XXX
70134	26	A	X-ray exam of middle ear	0.34	0.11	0.11	0.11	0.11	0.02	0.47	0.47	0.47	0.47	XXX
70134	TC	A	X-ray exam of middle ear	0.00	0.84	0.76	NA	NA	0.05	0.89	0.81	NA	NA	XXX
70140		A	X-ray exam of facial bones	0.19	0.56	0.65	NA	NA	0.05	0.80	0.89	NA	NA	XXX
70140	26	A	X-ray exam of facial bones	0.19	0.05	0.06	0.05	0.06	0.01	0.25	0.26	0.25	0.26	XXX
70140	TC	A	X-ray exam of facial bones	0.00	0.51	0.59	NA	NA	0.04	0.55	0.63	NA	NA	XXX
70150		A	X-ray exam of facial bones	0.26	0.88	0.87	NA	NA	0.06	1.20	1.19	NA	NA	XXX
70150	26	A	X-ray exam of facial bones	0.26	0.08	0.08	0.08	0.08	0.01	0.35	0.35	0.35	0.35	XXX
70150	TC	A	X-ray exam of facial bones	0.00	0.80	0.79	NA	NA	0.05	0.85	0.84	NA	NA	XXX
70160		A	X-ray exam of nasal bones	0.17	0.73	0.62	NA	NA	0.03	0.93	0.82	NA	NA	XXX
70160	26	A	X-ray exam of nasal bones	0.17	0.05	0.06	0.05	0.06	0.01	0.23	0.24	0.23	0.24	XXX
70160	TC	A	X-ray exam of nasal bones	0.00	0.67	0.56	NA	NA	0.02	0.69	0.58	NA	NA	XXX
70170		A	X-ray exam of tear duct	0.30	0.10	0.81	NA	NA	0.07	0.47	1.18	NA	NA	XXX
70170	26	A	X-ray exam of tear duct	0.30	0.10	0.10	0.10	0.10	0.01	0.41	0.41	0.41	0.41	XXX
70170	TC	A	X-ray exam of tear duct	0.00	0.00	0.71	NA	NA	0.06	0.06	0.77	NA	NA	XXX
70190		A	X-ray exam of eye sockets	0.21	0.75	0.71	NA	NA	0.05	1.01	0.97	NA	NA	XXX
70190	26	A	X-ray exam of eye sockets	0.21	0.07	0.07	0.07	0.07	0.01	0.29	0.29	0.29	0.29	XXX
70190	TC	A	X-ray exam of eye sockets	0.00	0.68	0.64	NA	NA	0.04	0.72	0.68	NA	NA	XXX
70200		A	X-ray exam of eye sockets	0.28	0.91	0.88	NA	NA	0.06	1.25	1.22	NA	NA	XXX
70200	26	A	X-ray exam of eye sockets	0.28	0.09	0.09	0.09	0.09	0.01	0.38	0.38	0.38	0.38	XXX
70200	TC	A	X-ray exam of eye sockets	0.00	0.82	0.79	NA	NA	0.05	0.87	0.84	NA	NA	XXX
70210		A	X-ray exam of sinuses	0.17	0.57	0.65	NA	NA	0.05	0.79	0.87	NA	NA	XXX
70210	26	A	X-ray exam of sinuses	0.17	0.05	0.06	0.05	0.06	0.01	0.23	0.24	0.23	0.24	XXX
70210	TC	A	X-ray exam of sinuses	0.00	0.53	0.60	NA	NA	0.04	0.57	0.64	NA	NA	XXX
70220		A	X-ray exam of sinuses	0.25	0.74	0.83	NA	NA	0.06	1.05	1.14	NA	NA	XXX
70220	26	A	X-ray exam of sinuses	0.25	0.07	0.08	0.07	0.08	0.01	0.33	0.34	0.33	0.34	XXX
70220	TC	A	X-ray exam of sinuses	0.00	0.67	0.75	NA	NA	0.05	0.72	0.80	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
70240		A	X-ray exam, pituitary saddle	0.19	0.62	0.52	NA	NA	0.03	0.84	0.74	NA	NA	XXX
70240	26	A	X-ray exam, pituitary saddle	0.19	0.06	0.06	0.06	0.06	0.01	0.26	0.26	0.26	0.26	XXX
70240	TC	A	X-ray exam, pituitary saddle	0.00	0.56	0.46	NA	NA	0.02	0.58	0.48	NA	NA	XXX
70250		A	X-ray exam of skull	0.24	0.72	0.71	NA	NA	0.05	1.01	1.00	NA	NA	XXX
70250	26	A	X-ray exam of skull	0.24	0.07	0.08	0.07	0.08	0.01	0.32	0.33	0.32	0.33	XXX
70250	TC	A	X-ray exam of skull	0.00	0.65	0.63	NA	NA	0.04	0.69	0.67	NA	NA	XXX
70260		A	X-ray exam of skull	0.34	0.91	0.98	NA	NA	0.08	1.33	1.40	NA	NA	XXX
70260	26	A	X-ray exam of skull	0.34	0.10	0.11	0.10	0.11	0.02	0.46	0.47	0.46	0.47	XXX
70260	TC	A	X-ray exam of skull	0.00	0.81	0.87	NA	NA	0.06	0.87	0.93	NA	NA	XXX
70300		A	X-ray exam of teeth	0.10	0.24	0.29	NA	NA	0.03	0.37	0.42	NA	NA	XXX
70300	26	A	X-ray exam of teeth	0.10	0.03	0.05	0.03	0.05	0.01	0.14	0.16	0.14	0.16	XXX
70300	TC	A	X-ray exam of teeth	0.00	0.21	0.25	NA	NA	0.02	0.23	0.27	NA	NA	XXX
70310		A	X-ray exam of teeth	0.16	0.83	0.58	NA	NA	0.03	1.02	0.77	NA	NA	XXX
70310	26	A	X-ray exam of teeth	0.16	0.05	0.07	0.05	0.07	0.01	0.22	0.24	0.22	0.24	XXX
70310	TC	A	X-ray exam of teeth	0.00	0.78	0.51	NA	NA	0.02	0.80	0.53	NA	NA	XXX
70320		A	Full mouth x-ray of teeth	0.22	0.98	0.89	NA	NA	0.06	1.26	1.17	NA	NA	XXX
70320	26	A	Full mouth x-ray of teeth	0.22	0.06	0.08	0.06	0.08	0.01	0.29	0.31	0.29	0.31	XXX
70320	TC	A	Full mouth x-ray of teeth	0.00	0.92	0.82	NA	NA	0.05	0.97	0.87	NA	NA	XXX
70328		A	X-ray exam of jaw joint	0.18	0.64	0.57	NA	NA	0.03	0.85	0.78	NA	NA	XXX
70328	26	A	X-ray exam of jaw joint	0.18	0.06	0.06	0.06	0.06	0.01	0.25	0.25	0.25	0.25	XXX
70328	TC	A	X-ray exam of jaw joint	0.00	0.58	0.51	NA	NA	0.02	0.60	0.53	NA	NA	XXX
70330		A	X-ray exam of jaw joints	0.24	1.04	0.95	NA	NA	0.06	1.34	1.25	NA	NA	XXX
70330	26	A	X-ray exam of jaw joints	0.24	0.08	0.08	0.08	0.08	0.01	0.33	0.33	0.33	0.33	XXX
70330	TC	A	X-ray exam of jaw joints	0.00	0.96	0.87	NA	NA	0.05	1.01	0.92	NA	NA	XXX
70332		A	X-ray exam of jaw joint	0.54	1.49	2.11	NA	NA	0.14	2.17	2.79	NA	NA	XXX
70332	26	A	X-ray exam of jaw joint	0.54	0.17	0.19	0.17	0.19	0.02	0.73	0.75	0.73	0.75	XXX
70332	TC	A	X-ray exam of jaw joint	0.00	1.32	1.91	NA	NA	0.12	1.44	2.03	NA	NA	XXX
70336		A	Magnetic image, jaw joint	1.48	12.94	12.03	NA	NA	0.66	15.08	14.17	NA	NA	XXX
70336	26	A	Magnetic image, jaw joint	1.48	0.53	0.50	0.53	0.50	0.07	2.08	2.05	2.08	2.05	XXX
70336	TC	A	Magnetic image, jaw joint	0.00	12.41	11.53	NA	NA	0.59	13.00	12.12	NA	NA	XXX
70350		A	X-ray head for orthodontia	0.17	0.33	0.42	NA	NA	0.03	0.53	0.62	NA	NA	XXX
70350	26	A	X-ray head for orthodontia	0.17	0.05	0.07	0.05	0.07	0.01	0.23	0.25	0.23	0.25	XXX
70350	TC	A	X-ray head for orthodontia	0.00	0.28	0.36	NA	NA	0.02	0.30	0.38	NA	NA	XXX
70355		A	Panoramic x-ray of jaws	0.20	0.31	0.56	NA	NA	0.05	0.56	0.81	NA	NA	XXX
70355	26	A	Panoramic x-ray of jaws	0.20	0.07	0.07	0.07	0.07	0.01	0.28	0.28	0.28	0.28	XXX
70355	TC	A	Panoramic x-ray of jaws	0.00	0.24	0.49	NA	NA	0.04	0.28	0.53	NA	NA	XXX
70360		A	X-ray exam of neck	0.17	0.59	0.51	NA	NA	0.03	0.79	0.71	NA	NA	XXX
70360	26	A	X-ray exam of neck	0.17	0.06	0.06	0.06	0.06	0.01	0.24	0.24	0.24	0.24	XXX
70360	TC	A	X-ray exam of neck	0.00	0.54	0.45	NA	NA	0.02	0.56	0.47	NA	NA	XXX
70370		A	Throat x-ray & fluoroscopy	0.32	1.70	1.48	NA	NA	0.08	2.10	1.88	NA	NA	XXX
70370	26	A	Throat x-ray & fluoroscopy	0.32	0.10	0.10	0.10	0.10	0.01	0.43	0.43	0.43	0.43	XXX
70370	TC	A	Throat x-ray & fluoroscopy	0.00	1.60	1.38	NA	NA	0.07	1.67	1.45	NA	NA	XXX
70371		A	Speech evaluation, complex	0.84	1.54	2.18	NA	NA	0.16	2.54	3.18	NA	NA	XXX
70371	26	A	Speech evaluation, complex	0.84	0.27	0.28	0.27	0.28	0.04	1.15	1.16	1.15	1.16	XXX
70371	TC	A	Speech evaluation, complex	0.00	1.27	1.90	NA	NA	0.12	1.39	2.02	NA	NA	XXX
70373		A	Contrast x-ray of larynx	0.44	1.70	1.87	NA	NA	0.13	2.27	2.44	NA	NA	XXX
70373	26	A	Contrast x-ray of larynx	0.44	0.13	0.14	0.13	0.14	0.02	0.59	0.60	0.59	0.60	XXX
70373	TC	A	Contrast x-ray of larynx	0.00	1.57	1.74	NA	NA	0.11	1.68	1.85	NA	NA	XXX
70380		A	X-ray exam of salivary gland	0.17	0.82	0.75	NA	NA	0.05	1.04	0.97	NA	NA	XXX
70380	26	A	X-ray exam of salivary gland	0.17	0.05	0.06	0.05	0.06	0.01	0.23	0.24	0.23	0.24	XXX
70380	TC	A	X-ray exam of salivary gland	0.00	0.77	0.70	NA	NA	0.04	0.81	0.74	NA	NA	XXX
70390		A	X-ray exam of salivary duct	0.38	2.44	2.04	NA	NA	0.13	2.95	2.55	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
70390	26	A	X-ray exam of salivary duct	0.38	0.13	0.12	0.13	0.12	0.02	0.53	0.52	0.53	0.52	XXX
70390	TC	A	X-ray exam of salivary duct	0.00	2.31	1.92	NA	NA	0.11	2.42	2.03	NA	NA	XXX
70450		A	Ct head/brain w/o dye	0.85	5.13	5.04	NA	NA	0.29	6.27	6.18	NA	NA	XXX
70450	26	A	Ct head/brain w/o dye	0.85	0.29	0.28	0.29	0.28	0.04	1.18	1.17	1.18	1.17	XXX
70450	TC	A	Ct head/brain w/o dye	0.00	4.84	4.76	NA	NA	0.25	5.09	5.01	NA	NA	XXX
70460		A	Ct head/brain w/dye	1.13	6.81	6.24	NA	NA	0.35	8.29	7.72	NA	NA	XXX
70460	26	A	Ct head/brain w/dye	1.13	0.39	0.38	0.39	0.38	0.05	1.57	1.56	1.57	1.56	XXX
70460	TC	A	Ct head/brain w/dye	0.00	6.41	5.86	NA	NA	0.30	6.71	6.16	NA	NA	XXX
70470		A	Ct head/brain w/o & w/dye	1.27	8.29	7.71	NA	NA	0.43	9.99	9.41	NA	NA	XXX
70470	26	A	Ct head/brain w/o & w/dye	1.27	0.44	0.43	0.44	0.43	0.06	1.77	1.76	1.77	1.76	XXX
70470	TC	A	Ct head/brain w/o & w/dye	0.00	7.85	7.28	NA	NA	0.37	8.22	7.65	NA	NA	XXX
70480		A	Ct orbit/ear/fossa w/o dye	1.28	8.85	6.08	NA	NA	0.31	10.44	7.67	NA	NA	XXX
70480	26	A	Ct orbit/ear/fossa w/o dye	1.28	0.44	0.43	0.44	0.43	0.06	1.78	1.77	1.78	1.77	XXX
70480	TC	A	Ct orbit/ear/fossa w/o dye	0.00	8.41	5.65	NA	NA	0.25	8.66	5.90	NA	NA	XXX
70481		A	Ct orbit/ear/fossa w/dye	1.38	10.46	7.21	NA	NA	0.36	12.20	8.95	NA	NA	XXX
70481	26	A	Ct orbit/ear/fossa w/dye	1.38	0.48	0.46	0.48	0.46	0.06	1.92	1.90	1.92	1.90	XXX
70481	TC	A	Ct orbit/ear/fossa w/dye	0.00	9.98	6.76	NA	NA	0.30	10.28	7.06	NA	NA	XXX
70482		A	Ct orbit/ear/fossa w/o&w/dye	1.45	11.99	8.68	NA	NA	0.43	13.87	10.56	NA	NA	XXX
70482	26	A	Ct orbit/ear/fossa w/o&w/dye	1.45	0.51	0.49	0.51	0.49	0.06	2.02	2.00	2.02	2.00	XXX
70482	TC	A	Ct orbit/ear/fossa w/o&w/dye	0.00	11.48	8.19	NA	NA	0.37	11.85	8.56	NA	NA	XXX
70486		A	Ct maxillofacial w/o dye	1.14	7.07	5.59	NA	NA	0.30	8.51	7.03	NA	NA	XXX
70486	26	A	Ct maxillofacial w/o dye	1.14	0.39	0.38	0.39	0.38	0.05	1.58	1.57	1.58	1.57	XXX
70486	TC	A	Ct maxillofacial w/o dye	0.00	6.67	5.22	NA	NA	0.25	6.92	5.47	NA	NA	XXX
70487		A	Ct maxillofacial w/dye	1.30	8.75	6.77	NA	NA	0.36	10.41	8.43	NA	NA	XXX
70487	26	A	Ct maxillofacial w/dye	1.30	0.46	0.44	0.46	0.44	0.06	1.82	1.80	1.82	1.80	XXX
70487	TC	A	Ct maxillofacial w/dye	0.00	8.29	6.33	NA	NA	0.30	8.59	6.63	NA	NA	XXX
70488		A	Ct maxillofacial w/o & w/dye	1.42	10.86	8.38	NA	NA	0.43	12.71	10.23	NA	NA	XXX
70488	26	A	Ct maxillofacial w/o & w/dye	1.42	0.49	0.47	0.49	0.47	0.06	1.97	1.95	1.97	1.95	XXX
70488	TC	A	Ct maxillofacial w/o & w/dye	0.00	10.37	7.91	NA	NA	0.37	10.74	8.28	NA	NA	XXX
70490		A	Ct soft tissue neck w/o dye	1.28	6.78	5.56	NA	NA	0.31	8.37	7.15	NA	NA	XXX
70490	26	A	Ct soft tissue neck w/o dye	1.28	0.45	0.43	0.45	0.43	0.06	1.79	1.77	1.79	1.77	XXX
70490	TC	A	Ct soft tissue neck w/o dye	0.00	6.33	5.13	NA	NA	0.25	6.58	5.38	NA	NA	XXX
70491		A	Ct soft tissue neck w/dye	1.38	8.39	6.70	NA	NA	0.36	10.13	8.44	NA	NA	XXX
70491	26	A	Ct soft tissue neck w/dye	1.38	0.48	0.46	0.48	0.46	0.06	1.92	1.90	1.92	1.90	XXX
70491	TC	A	Ct soft tissue neck w/dye	0.00	7.91	6.24	NA	NA	0.30	8.21	6.54	NA	NA	XXX
70492		A	Ct sft tsue nck w/o & w/dye	1.45	10.53	8.30	NA	NA	0.43	12.41	10.18	NA	NA	XXX
70492	26	A	Ct sft tsue nck w/o & w/dye	1.45	0.51	0.48	0.51	0.48	0.06	2.02	1.99	2.02	1.99	XXX
70492	TC	A	Ct sft tsue nck w/o & w/dye	0.00	10.02	7.82	NA	NA	0.37	10.39	8.19	NA	NA	XXX
70496		A	Ct angiography, head	1.75	17.86	12.87	NA	NA	0.66	20.27	15.28	NA	NA	XXX
70496	26	A	Ct angiography, head	1.75	0.62	0.58	0.62	0.58	0.08	2.45	2.41	2.45	2.41	XXX
70496	TC	A	Ct angiography, head	0.00	17.24	12.28	NA	NA	0.58	17.82	12.86	NA	NA	XXX
70498		A	Ct angiography, neck	1.75	17.92	12.88	NA	NA	0.66	20.33	15.29	NA	NA	XXX
70498	26	A	Ct angiography, neck	1.75	0.63	0.59	0.63	0.59	0.08	2.46	2.42	2.46	2.42	XXX
70498	TC	A	Ct angiography, neck	0.00	17.29	12.30	NA	NA	0.58	17.87	12.88	NA	NA	XXX
70540		A	Mri orbit/face/neck w/o dye	1.35	14.98	12.50	NA	NA	0.45	16.78	14.30	NA	NA	XXX
70540	26	A	Mri orbit/face/neck w/o dye	1.35	0.48	0.45	0.48	0.45	0.06	1.89	1.86	1.89	1.86	XXX
70540	TC	A	Mri orbit/face/neck w/o dye	0.00	14.50	12.05	NA	NA	0.39	14.89	12.44	NA	NA	XXX
70542		A	Mri orbit/face/neck w/dye	1.62	16.03	14.52	NA	NA	0.54	18.19	16.68	NA	NA	XXX
70542	26	A	Mri orbit/face/neck w/dye	1.62	0.57	0.54	0.57	0.54	0.07	2.26	2.23	2.26	2.23	XXX
70542	TC	A	Mri orbit/face/neck w/dye	0.00	15.46	13.98	NA	NA	0.47	15.93	14.45	NA	NA	XXX
70543		A	Mri orbt/fac/nck w/o & w/dye	2.15	19.81	24.20	NA	NA	0.94	22.90	27.29	NA	NA	XXX
70543	26	A	Mri orbt/fac/nck w/o & w/dye	2.15	0.76	0.72	0.76	0.72	0.10	3.01	2.97	3.01	2.97	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
70543	TC	A	Mri orbt/fac/nck w/o & w/dye	0.00	19.05	23.48	NA	NA	0.84	19.89	24.32	NA	NA	XXX
70544		A	Mr angiography head w/o dye	1.20	16.61	12.88	NA	NA	0.64	18.45	14.72	NA	NA	XXX
70544	26	A	Mr angiography head w/o dye	1.20	0.42	0.41	0.42	0.41	0.05	1.67	1.66	1.67	1.66	XXX
70544	TC	A	Mr angiography head w/o dye	0.00	16.20	12.47	NA	NA	0.59	16.79	13.06	NA	NA	XXX
70545		A	Mr angiography head w/dye	1.20	16.54	12.85	NA	NA	0.64	18.38	14.69	NA	NA	XXX
70545	26	A	Mr angiography head w/dye	1.20	0.42	0.40	0.42	0.40	0.05	1.67	1.65	1.67	1.65	XXX
70545	TC	A	Mr angiography head w/dye	0.00	16.13	12.46	NA	NA	0.59	16.72	13.05	NA	NA	XXX
70546		A	Mr angiograph head w/o&w/dye	1.80	25.29	23.62	NA	NA	0.67	27.76	26.09	NA	NA	XXX
70546	26	A	Mr angiograph head w/o&w/dye	1.80	0.63	0.60	0.63	0.60	0.08	2.51	2.48	2.51	2.48	XXX
70546	TC	A	Mr angiograph head w/o&w/dye	0.00	24.66	23.02	NA	NA	0.59	25.25	23.61	NA	NA	XXX
70547		A	Mr angiography neck w/o dye	1.20	16.58	12.86	NA	NA	0.64	18.42	14.70	NA	NA	XXX
70547	26	A	Mr angiography neck w/o dye	1.20	0.42	0.40	0.42	0.40	0.05	1.67	1.65	1.67	1.65	XXX
70547	TC	A	Mr angiography neck w/o dye	0.00	16.16	12.46	NA	NA	0.59	16.75	13.05	NA	NA	XXX
70548		A	Mr angiography neck w/dye	1.20	17.44	13.08	NA	NA	0.64	19.28	14.92	NA	NA	XXX
70548	26	A	Mr angiography neck w/dye	1.20	0.42	0.40	0.42	0.40	0.05	1.67	1.65	1.67	1.65	XXX
70548	TC	A	Mr angiography neck w/dye	0.00	17.02	12.68	NA	NA	0.59	17.61	13.27	NA	NA	XXX
70549		A	Mr angiograph neck w/o&w/dye	1.80	25.26	23.61	NA	NA	0.67	27.73	26.08	NA	NA	XXX
70549	26	A	Mr angiograph neck w/o&w/dye	1.80	0.63	0.60	0.63	0.60	0.08	2.51	2.48	2.51	2.48	XXX
70549	TC	A	Mr angiograph neck w/o&w/dye	0.00	24.63	23.01	NA	NA	0.59	25.22	23.60	NA	NA	XXX
70551		A	Mri brain w/o dye	1.48	15.20	12.59	NA	NA	0.66	17.34	14.73	NA	NA	XXX
70551	26	A	Mri brain w/o dye	1.48	0.52	0.50	0.52	0.50	0.07	2.07	2.05	2.07	2.05	XXX
70551	TC	A	Mri brain w/o dye	0.00	14.68	12.09	NA	NA	0.59	15.27	12.68	NA	NA	XXX
70552		A	Mri brain w/dye	1.78	16.31	14.63	NA	NA	0.78	18.87	17.19	NA	NA	XXX
70552	26	A	Mri brain w/dye	1.78	0.62	0.60	0.62	0.60	0.08	2.48	2.46	2.48	2.46	XXX
70552	TC	A	Mri brain w/dye	0.00	15.70	14.04	NA	NA	0.70	16.40	14.74	NA	NA	XXX
70553		A	Mri brain w/o & w/dye	2.36	19.01	24.05	NA	NA	1.41	22.78	27.82	NA	NA	XXX
70553	26	A	Mri brain w/o & w/dye	2.36	0.82	0.79	0.82	0.79	0.10	3.28	3.25	3.28	3.25	XXX
70553	TC	A	Mri brain w/o & w/dye	0.00	18.19	23.26	NA	NA	1.31	19.50	24.57	NA	NA	XXX
70557	26	A	Mri brain w/o dye	2.90	1.00	1.10	1.00	1.10	0.08	3.98	4.08	3.98	4.08	XXX
70558	26	A	Mri brain w/dye	3.20	1.13	1.21	1.13	1.21	0.10	4.43	4.51	4.43	4.51	XXX
70559	26	A	Mri brain w/o & w/dye	3.20	1.11	1.21	1.11	1.21	0.12	4.43	4.53	4.43	4.53	XXX
71010		A	Chest x-ray	0.18	0.45	0.51	NA	NA	0.03	0.66	0.72	NA	NA	XXX
71010	26	A	Chest x-ray	0.18	0.06	0.06	0.06	0.06	0.01	0.25	0.25	0.25	0.25	XXX
71010	TC	A	Chest x-ray	0.00	0.39	0.45	NA	NA	0.02	0.41	0.47	NA	NA	XXX
71015		A	Chest x-ray	0.21	0.59	0.59	NA	NA	0.03	0.83	0.83	NA	NA	XXX
71015	26	A	Chest x-ray	0.21	0.07	0.07	0.07	0.07	0.01	0.29	0.29	0.29	0.29	XXX
71015	TC	A	Chest x-ray	0.00	0.52	0.52	NA	NA	0.02	0.54	0.54	NA	NA	XXX
71020		A	Chest x-ray	0.22	0.59	0.67	NA	NA	0.05	0.86	0.94	NA	NA	XXX
71020	26	A	Chest x-ray	0.22	0.07	0.07	0.07	0.07	0.01	0.30	0.30	0.30	0.30	XXX
71020	TC	A	Chest x-ray	0.00	0.52	0.60	NA	NA	0.04	0.56	0.64	NA	NA	XXX
71021		A	Chest x-ray	0.27	0.73	0.80	NA	NA	0.06	1.06	1.13	NA	NA	XXX
71021	26	A	Chest x-ray	0.27	0.09	0.09	0.09	0.09	0.01	0.37	0.37	0.37	0.37	XXX
71021	TC	A	Chest x-ray	0.00	0.65	0.71	NA	NA	0.05	0.70	0.76	NA	NA	XXX
71022		A	Chest x-ray	0.31	0.92	0.85	NA	NA	0.06	1.29	1.22	NA	NA	XXX
71022	26	A	Chest x-ray	0.31	0.10	0.10	0.10	0.10	0.01	0.42	0.42	0.42	0.42	XXX
71022	TC	A	Chest x-ray	0.00	0.82	0.75	NA	NA	0.05	0.87	0.80	NA	NA	XXX
71023		A	Chest x-ray and fluoroscopy	0.38	1.60	1.08	NA	NA	0.06	2.04	1.52	NA	NA	XXX
71023	26	A	Chest x-ray and fluoroscopy	0.38	0.15	0.14	0.15	0.14	0.01	0.54	0.53	0.54	0.53	XXX
71023	TC	A	Chest x-ray and fluoroscopy	0.00	1.45	0.95	NA	NA	0.05	1.50	1.00	NA	NA	XXX
71030		A	Chest x-ray	0.31	0.95	0.90	NA	NA	0.06	1.32	1.27	NA	NA	XXX
71030	26	A	Chest x-ray	0.31	0.10	0.10	0.10	0.10	0.01	0.42	0.42	0.42	0.42	XXX
71030	TC	A	Chest x-ray	0.00	0.85	0.80	NA	NA	0.05	0.90	0.85	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
71034		A	Chest x-ray and fluoroscopy	0.46	2.13	1.73	NA	NA	0.10	2.69	2.29	NA	NA	XXX
71034	26	A	Chest x-ray and fluoroscopy	0.46	0.19	0.17	0.19	0.17	0.02	0.67	0.65	0.67	0.65	XXX
71034	TC	A	Chest x-ray and fluoroscopy	0.00	1.94	1.57	NA	NA	0.08	2.02	1.65	NA	NA	XXX
71035		A	Chest x-ray	0.18	0.81	0.64	NA	NA	0.03	1.02	0.85	NA	NA	XXX
71035	26	A	Chest x-ray	0.18	0.06	0.06	0.06	0.06	0.01	0.25	0.25	0.25	0.25	XXX
71035	TC	A	Chest x-ray	0.00	0.75	0.58	NA	NA	0.02	0.77	0.60	NA	NA	XXX
71040		A	Contrast x-ray of bronchi	0.58	2.13	1.77	NA	NA	0.11	2.82	2.46	NA	NA	XXX
71040	26	A	Contrast x-ray of bronchi	0.58	0.17	0.19	0.17	0.19	0.03	0.78	0.80	0.78	0.80	XXX
71040	TC	A	Contrast x-ray of bronchi	0.00	1.96	1.59	NA	NA	0.08	2.04	1.67	NA	NA	XXX
71060		A	Contrast x-ray of bronchi	0.74	3.19	2.64	NA	NA	0.16	4.09	3.54	NA	NA	XXX
71060	26	A	Contrast x-ray of bronchi	0.74	0.25	0.24	0.25	0.24	0.03	1.02	1.01	1.02	1.01	XXX
71060	TC	A	Contrast x-ray of bronchi	0.00	2.95	2.40	NA	NA	0.13	3.08	2.53	NA	NA	XXX
71090		A	X-ray & pacemaker insertion	0.54	0.29	1.49	NA	NA	0.13	0.96	2.16	NA	NA	XXX
71090	26	A	X-ray & pacemaker insertion	0.54	0.29	0.23	0.29	0.23	0.02	0.85	0.79	0.85	0.79	XXX
71090	TC	A	X-ray & pacemaker insertion	0.00	0.00	1.26	NA	NA	0.11	0.11	1.37	NA	NA	XXX
71100		A	X-ray exam of ribs	0.22	0.64	0.64	NA	NA	0.05	0.91	0.91	NA	NA	XXX
71100	26	A	X-ray exam of ribs	0.22	0.07	0.07	0.07	0.07	0.01	0.30	0.30	0.30	0.30	XXX
71100	TC	A	X-ray exam of ribs	0.00	0.57	0.57	NA	NA	0.04	0.61	0.61	NA	NA	XXX
71101		A	X-ray exam of ribs/chest	0.27	0.79	0.77	NA	NA	0.05	1.11	1.09	NA	NA	XXX
71101	26	A	X-ray exam of ribs/chest	0.27	0.09	0.09	0.09	0.09	0.01	0.37	0.37	0.37	0.37	XXX
71101	TC	A	X-ray exam of ribs/chest	0.00	0.70	0.68	NA	NA	0.04	0.74	0.72	NA	NA	XXX
71110		A	X-ray exam of ribs	0.27	0.80	0.85	NA	NA	0.06	1.13	1.18	NA	NA	XXX
71110	26	A	X-ray exam of ribs	0.27	0.08	0.09	0.08	0.09	0.01	0.36	0.37	0.36	0.37	XXX
71110	TC	A	X-ray exam of ribs	0.00	0.72	0.77	NA	NA	0.05	0.77	0.82	NA	NA	XXX
71111		A	X-ray exam of ribs/chest	0.32	1.10	1.02	NA	NA	0.07	1.49	1.41	NA	NA	XXX
71111	26	A	X-ray exam of ribs/chest	0.32	0.10	0.10	0.10	0.10	0.01	0.43	0.43	0.43	0.43	XXX
71111	TC	A	X-ray exam of ribs/chest	0.00	1.00	0.92	NA	NA	0.06	1.06	0.98	NA	NA	XXX
71120		A	X-ray exam of breastbone	0.20	0.65	0.70	NA	NA	0.05	0.90	0.95	NA	NA	XXX
71120	26	A	X-ray exam of breastbone	0.20	0.07	0.07	0.07	0.07	0.01	0.28	0.28	0.28	0.28	XXX
71120	TC	A	X-ray exam of breastbone	0.00	0.58	0.63	NA	NA	0.04	0.62	0.67	NA	NA	XXX
71130		A	X-ray exam of breastbone	0.22	0.78	0.78	NA	NA	0.05	1.05	1.05	NA	NA	XXX
71130	26	A	X-ray exam of breastbone	0.22	0.08	0.07	0.08	0.07	0.01	0.31	0.30	0.31	0.30	XXX
71130	TC	A	X-ray exam of breastbone	0.00	0.70	0.71	NA	NA	0.04	0.74	0.75	NA	NA	XXX
71250		A	Ct thorax w/o dye	1.16	6.74	6.42	NA	NA	0.36	8.26	7.94	NA	NA	XXX
71250	26	A	Ct thorax w/o dye	1.16	0.40	0.39	0.40	0.39	0.05	1.61	1.60	1.61	1.60	XXX
71250	TC	A	Ct thorax w/o dye	0.00	6.34	6.03	NA	NA	0.31	6.65	6.34	NA	NA	XXX
71260		A	Ct thorax w/dye	1.24	8.35	7.71	NA	NA	0.42	10.01	9.37	NA	NA	XXX
71260	26	A	Ct thorax w/dye	1.24	0.43	0.42	0.43	0.42	0.05	1.72	1.71	1.72	1.71	XXX
71260	TC	A	Ct thorax w/dye	0.00	7.92	7.30	NA	NA	0.37	8.29	7.67	NA	NA	XXX
71270		A	Ct thorax w/o & w/dye	1.38	10.54	9.63	NA	NA	0.52	12.44	11.53	NA	NA	XXX
71270	26	A	Ct thorax w/o & w/dye	1.38	0.48	0.46	0.48	0.46	0.06	1.92	1.90	1.92	1.90	XXX
71270	TC	A	Ct thorax w/o & w/dye	0.00	10.06	9.18	NA	NA	0.46	10.52	9.64	NA	NA	XXX
71275		A	Ct angiography, chest	1.92	12.29	12.86	NA	NA	0.48	14.69	15.26	NA	NA	XXX
71275	26	A	Ct angiography, chest	1.92	0.68	0.64	0.68	0.64	0.09	2.69	2.65	2.69	2.65	XXX
71275	TC	A	Ct angiography, chest	0.00	11.61	12.22	NA	NA	0.39	12.00	12.61	NA	NA	XXX
71550		A	Mri chest w/o dye	1.46	17.27	13.10	NA	NA	0.51	19.24	15.07	NA	NA	XXX
71550	26	A	Mri chest w/o dye	1.46	0.52	0.49	0.52	0.49	0.06	2.04	2.01	2.04	2.01	XXX
71550	TC	A	Mri chest w/o dye	0.00	16.76	12.61	NA	NA	0.45	17.21	13.06	NA	NA	XXX
71551		A	Mri chest w/dye	1.73	18.81	15.24	NA	NA	0.60	21.14	17.57	NA	NA	XXX
71551	26	A	Mri chest w/dye	1.73	0.61	0.58	0.61	0.58	0.08	2.42	2.39	2.42	2.39	XXX
71551	TC	A	Mri chest w/dye	0.00	18.20	14.66	NA	NA	0.52	18.72	15.18	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
71552		A	Mri chest w/o & w/dye	2.26	23.67	25.19	NA	NA	0.78	26.71	28.23	NA	NA	XXX
71552	26	A	Mri chest w/o & w/dye	2.26	0.81	0.76	0.81	0.76	0.10	3.17	3.12	3.17	3.12	XXX
71552	TC	A	Mri chest w/o & w/dye	0.00	22.86	24.43	NA	NA	0.68	23.54	25.11	NA	NA	XXX
71555		R	Mri angio chest w or w/o dye	1.81	16.14	12.91	NA	NA	0.67	18.62	15.39	NA	NA	XXX
71555	26	R	Mri angio chest w or w/o dye	1.81	0.67	0.62	0.67	0.62	0.08	2.56	2.51	2.56	2.51	XXX
71555	TC	R	Mri angio chest w or w/o dye	0.00	15.47	12.29	NA	NA	0.59	16.06	12.88	NA	NA	XXX
72010		A	X-ray exam of spine	0.45	1.45	1.24	NA	NA	0.08	1.98	1.77	NA	NA	XXX
72010	26	A	X-ray exam of spine	0.45	0.13	0.15	0.13	0.15	0.02	0.60	0.62	0.60	0.62	XXX
72010	TC	A	X-ray exam of spine	0.00	1.32	1.10	NA	NA	0.06	1.38	1.16	NA	NA	XXX
72020		A	X-ray exam of spine	0.15	0.48	0.47	NA	NA	0.03	0.66	0.65	NA	NA	XXX
72020	26	A	X-ray exam of spine	0.15	0.05	0.05	0.05	0.05	0.01	0.21	0.21	0.21	0.21	XXX
72020	TC	A	X-ray exam of spine	0.00	0.43	0.42	NA	NA	0.02	0.45	0.44	NA	NA	XXX
72040		A	X-ray exam of neck spine	0.22	0.79	0.70	NA	NA	0.05	1.06	0.97	NA	NA	XXX
72040	26	A	X-ray exam of neck spine	0.22	0.07	0.07	0.07	0.07	0.01	0.30	0.30	0.30	0.30	XXX
72040	TC	A	X-ray exam of neck spine	0.00	0.72	0.63	NA	NA	0.04	0.76	0.67	NA	NA	XXX
72050		A	X-ray exam of neck spine	0.31	1.11	1.02	NA	NA	0.07	1.49	1.40	NA	NA	XXX
72050	26	A	X-ray exam of neck spine	0.31	0.10	0.10	0.10	0.10	0.01	0.42	0.42	0.42	0.42	XXX
72050	TC	A	X-ray exam of neck spine	0.00	1.00	0.92	NA	NA	0.06	1.06	0.98	NA	NA	XXX
72052		A	X-ray exam of neck spine	0.36	1.43	1.30	NA	NA	0.08	1.87	1.74	NA	NA	XXX
72052	26	A	X-ray exam of neck spine	0.36	0.12	0.12	0.12	0.12	0.02	0.50	0.50	0.50	0.50	XXX
72052	TC	A	X-ray exam of neck spine	0.00	1.31	1.18	NA	NA	0.06	1.37	1.24	NA	NA	XXX
72069		A	X-ray exam of trunk spine	0.22	0.78	0.62	NA	NA	0.03	1.03	0.87	NA	NA	XXX
72069	26	A	X-ray exam of trunk spine	0.22	0.08	0.08	0.08	0.08	0.01	0.31	0.31	0.31	0.31	XXX
72069	TC	A	X-ray exam of trunk spine	0.00	0.70	0.54	NA	NA	0.02	0.72	0.56	NA	NA	XXX
72070		A	X-ray exam of thoracic spine	0.22	0.66	0.71	NA	NA	0.05	0.93	0.98	NA	NA	XXX
72070	26	A	X-ray exam of thoracic spine	0.22	0.07	0.07	0.07	0.07	0.01	0.30	0.30	0.30	0.30	XXX
72070	TC	A	X-ray exam of thoracic spine	0.00	0.59	0.64	NA	NA	0.04	0.63	0.68	NA	NA	XXX
72072		A	X-ray exam of thoracic spine	0.22	0.80	0.80	NA	NA	0.06	1.08	1.08	NA	NA	XXX
72072	26	A	X-ray exam of thoracic spine	0.22	0.07	0.07	0.07	0.07	0.01	0.30	0.30	0.30	0.30	XXX
72072	TC	A	X-ray exam of thoracic spine	0.00	0.73	0.73	NA	NA	0.05	0.78	0.78	NA	NA	XXX
72074		A	X-ray exam of thoracic spine	0.22	0.98	0.98	NA	NA	0.07	1.27	1.27	NA	NA	XXX
72074	26	A	X-ray exam of thoracic spine	0.22	0.07	0.07	0.07	0.07	0.01	0.30	0.30	0.30	0.30	XXX
72074	TC	A	X-ray exam of thoracic spine	0.00	0.91	0.91	NA	NA	0.06	0.97	0.97	NA	NA	XXX
72080		A	X-ray exam of trunk spine	0.22	0.71	0.73	NA	NA	0.05	0.98	1.00	NA	NA	XXX
72080	26	A	X-ray exam of trunk spine	0.22	0.08	0.07	0.08	0.07	0.01	0.31	0.30	0.31	0.30	XXX
72080	TC	A	X-ray exam of trunk spine	0.00	0.63	0.66	NA	NA	0.04	0.67	0.70	NA	NA	XXX
72090		A	X-ray exam of trunk spine	0.28	1.04	0.83	NA	NA	0.05	1.37	1.16	NA	NA	XXX
72090	26	A	X-ray exam of trunk spine	0.28	0.10	0.09	0.10	0.09	0.01	0.39	0.38	0.39	0.38	XXX
72090	TC	A	X-ray exam of trunk spine	0.00	0.93	0.74	NA	NA	0.04	0.97	0.78	NA	NA	XXX
72100		A	X-ray exam of lower spine	0.22	0.83	0.76	NA	NA	0.05	1.10	1.03	NA	NA	XXX
72100	26	A	X-ray exam of lower spine	0.22	0.07	0.07	0.07	0.07	0.01	0.30	0.30	0.30	0.30	XXX
72100	TC	A	X-ray exam of lower spine	0.00	0.76	0.69	NA	NA	0.04	0.80	0.73	NA	NA	XXX
72110		A	X-ray exam of lower spine	0.31	1.18	1.05	NA	NA	0.07	1.56	1.43	NA	NA	XXX
72110	26	A	X-ray exam of lower spine	0.31	0.11	0.10	0.11	0.10	0.01	0.43	0.42	0.43	0.42	XXX
72110	TC	A	X-ray exam of lower spine	0.00	1.07	0.95	NA	NA	0.06	1.13	1.01	NA	NA	XXX
72114		A	X-ray exam of lower spine	0.36	1.61	1.39	NA	NA	0.08	2.05	1.83	NA	NA	XXX
72114	26	A	X-ray exam of lower spine	0.36	0.13	0.12	0.13	0.12	0.02	0.51	0.50	0.51	0.50	XXX
72114	TC	A	X-ray exam of lower spine	0.00	1.48	1.26	NA	NA	0.06	1.54	1.32	NA	NA	XXX
72120		A	X-ray exam of lower spine	0.22	1.09	0.99	NA	NA	0.07	1.38	1.28	NA	NA	XXX
72120	26	A	X-ray exam of lower spine	0.22	0.08	0.07	0.08	0.07	0.01	0.31	0.30	0.31	0.30	XXX
72120	TC	A	X-ray exam of lower spine	0.00	1.01	0.92	NA	NA	0.06	1.07	0.98	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
72125		A	Ct neck spine w/o dye	1.16	6.75	6.42	NA	NA	0.36	8.27	7.94	NA	NA	XXX
72125	26	A	Ct neck spine w/o dye	1.16	0.40	0.39	0.40	0.39	0.05	1.61	1.60	1.61	1.60	XXX
72125	TC	A	Ct neck spine w/o dye	0.00	6.34	6.03	NA	NA	0.31	6.65	6.34	NA	NA	XXX
72126		A	Ct neck spine w/dye	1.22	8.37	7.71	NA	NA	0.42	10.01	9.35	NA	NA	XXX
72126	26	A	Ct neck spine w/dye	1.22	0.43	0.41	0.43	0.41	0.05	1.70	1.68	1.70	1.68	XXX
72126	TC	A	Ct neck spine w/dye	0.00	7.95	7.31	NA	NA	0.37	8.32	7.68	NA	NA	XXX
72127		A	Ct neck spine w/o & w/dye	1.27	10.41	9.58	NA	NA	0.52	12.20	11.37	NA	NA	XXX
72127	26	A	Ct neck spine w/o & w/dye	1.27	0.46	0.43	0.46	0.43	0.06	1.79	1.76	1.79	1.76	XXX
72127	TC	A	Ct neck spine w/o & w/dye	0.00	9.95	9.15	NA	NA	0.46	10.41	9.61	NA	NA	XXX
72128		A	Ct chest spine w/o dye	1.16	6.74	6.42	NA	NA	0.36	8.26	7.94	NA	NA	XXX
72128	26	A	Ct chest spine w/o dye	1.16	0.40	0.39	0.40	0.39	0.05	1.61	1.60	1.61	1.60	XXX
72128	TC	A	Ct chest spine w/o dye	0.00	6.34	6.03	NA	NA	0.31	6.65	6.34	NA	NA	XXX
72129		A	Ct chest spine w/dye	1.22	8.38	7.71	NA	NA	0.42	10.02	9.35	NA	NA	XXX
72129	26	A	Ct chest spine w/dye	1.22	0.43	0.41	0.43	0.41	0.05	1.70	1.68	1.70	1.68	XXX
72129	TC	A	Ct chest spine w/dye	0.00	7.95	7.31	NA	NA	0.37	8.32	7.68	NA	NA	XXX
72130		A	Ct chest spine w/o & w/dye	1.27	10.37	9.57	NA	NA	0.52	12.16	11.36	NA	NA	XXX
72130	26	A	Ct chest spine w/o & w/dye	1.27	0.46	0.43	0.46	0.43	0.06	1.79	1.76	1.79	1.76	XXX
72130	TC	A	Ct chest spine w/o & w/dye	0.00	9.91	9.14	NA	NA	0.46	10.37	9.60	NA	NA	XXX
72131		A	Ct lumbar spine w/o dye	1.16	6.73	6.42	NA	NA	0.36	8.25	7.94	NA	NA	XXX
72131	26	A	Ct lumbar spine w/o dye	1.16	0.40	0.39	0.40	0.39	0.05	1.61	1.60	1.61	1.60	XXX
72131	TC	A	Ct lumbar spine w/o dye	0.00	6.32	6.03	NA	NA	0.31	6.63	6.34	NA	NA	XXX
72132		A	Ct lumbar spine w/dye	1.22	8.37	7.71	NA	NA	0.42	10.01	9.35	NA	NA	XXX
72132	26	A	Ct lumbar spine w/dye	1.22	0.43	0.41	0.43	0.41	0.05	1.70	1.68	1.70	1.68	XXX
72132	TC	A	Ct lumbar spine w/dye	0.00	7.94	7.30	NA	NA	0.37	8.31	7.67	NA	NA	XXX
72133		A	Ct lumbar spine w/o & w/dye	1.27	10.53	9.61	NA	NA	0.52	12.32	11.40	NA	NA	XXX
72133	26	A	Ct lumbar spine w/o & w/dye	1.27	0.44	0.43	0.44	0.43	0.06	1.77	1.76	1.77	1.76	XXX
72133	TC	A	Ct lumbar spine w/o & w/dye	0.00	10.09	9.18	NA	NA	0.46	10.55	9.64	NA	NA	XXX
72141		A	Mri neck spine w/o dye	1.60	13.15	12.11	NA	NA	0.66	15.41	14.37	NA	NA	XXX
72141	26	A	Mri neck spine w/o dye	1.60	0.57	0.54	0.57	0.54	0.07	2.24	2.21	2.24	2.21	XXX
72141	TC	A	Mri neck spine w/o dye	0.00	12.58	11.57	NA	NA	0.59	13.17	12.16	NA	NA	XXX
72142		A	Mri neck spine w/dye	1.92	16.37	14.68	NA	NA	0.79	19.08	17.39	NA	NA	XXX
72142	26	A	Mri neck spine w/dye	1.92	0.67	0.65	0.67	0.65	0.09	2.68	2.66	2.68	2.66	XXX
72142	TC	A	Mri neck spine w/dye	0.00	15.70	14.04	NA	NA	0.70	16.40	14.74	NA	NA	XXX
72146		A	Mri chest spine w/o dye	1.60	13.16	13.05	NA	NA	0.71	15.47	15.36	NA	NA	XXX
72146	26	A	Mri chest spine w/o dye	1.60	0.56	0.54	0.56	0.54	0.07	2.23	2.21	2.23	2.21	XXX
72146	TC	A	Mri chest spine w/o dye	0.00	12.59	12.51	NA	NA	0.64	13.23	13.15	NA	NA	XXX
72147		A	Mri chest spine w/dye	1.92	14.19	14.13	NA	NA	0.79	16.90	16.84	NA	NA	XXX
72147	26	A	Mri chest spine w/dye	1.92	0.67	0.64	0.67	0.64	0.09	2.68	2.65	2.68	2.65	XXX
72147	TC	A	Mri chest spine w/dye	0.00	13.52	13.49	NA	NA	0.70	14.22	14.19	NA	NA	XXX
72148		A	Mri lumbar spine w/o dye	1.48	13.11	13.01	NA	NA	0.71	15.30	15.20	NA	NA	XXX
72148	26	A	Mri lumbar spine w/o dye	1.48	0.52	0.50	0.52	0.50	0.07	2.07	2.05	2.07	2.05	XXX
72148	TC	A	Mri lumbar spine w/o dye	0.00	12.59	12.51	NA	NA	0.64	13.23	13.15	NA	NA	XXX
72149		A	Mri lumbar spine w/dye	1.78	16.32	14.64	NA	NA	0.78	18.88	17.20	NA	NA	XXX
72149	26	A	Mri lumbar spine w/dye	1.78	0.63	0.61	0.63	0.61	0.08	2.49	2.47	2.49	2.47	XXX
72149	TC	A	Mri lumbar spine w/dye	0.00	15.70	14.04	NA	NA	0.70	16.40	14.74	NA	NA	XXX
72156		A	Mri neck spine w/o & w/dye	2.57	18.72	24.03	NA	NA	1.42	22.71	28.02	NA	NA	XXX
72156	26	A	Mri neck spine w/o & w/dye	2.57	0.90	0.86	0.90	0.86	0.11	3.58	3.54	3.58	3.54	XXX
72156	TC	A	Mri neck spine w/o & w/dye	0.00	17.82	23.17	NA	NA	1.31	19.13	24.48	NA	NA	XXX
72157		A	Mri chest spine w/o & w/dye	2.57	17.03	23.60	NA	NA	1.42	21.02	27.59	NA	NA	XXX
72157	26	A	Mri chest spine w/o & w/dye	2.57	0.90	0.86	0.90	0.86	0.11	3.58	3.54	3.58	3.54	XXX
72157	TC	A	Mri chest spine w/o & w/dye	0.00	16.13	22.75	NA	NA	1.31	17.44	24.06	NA	NA	XXX
72158		A	Mri lumbar spine w/o & w/dye	2.36	18.65	23.96	NA	NA	1.41	22.42	27.73	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
72158	26	A	Mri lumbar spine w/o & w/dye	2.36	0.83	0.79	0.83	0.79	0.10	3.29	3.25	3.29	3.25	XXX
72158	TC	A	Mri lumbar spine w/o & w/dye	0.00	17.81	23.17	NA	NA	1.31	19.12	24.48	NA	NA	XXX
72159		N	Mr angio spine w/o&w/dye	1.80	14.64	13.38	14.64	13.38	0.74	17.18	15.92	17.18	15.92	XXX
72159	26	N	Mr angio spine w/o&w/dye	1.80	0.40	0.62	0.40	0.62	0.10	2.30	2.52	2.30	2.52	XXX
72159	TC	N	Mr angio spine w/o&w/dye	0.00	14.24	12.76	14.24	12.76	0.64	14.88	13.40	14.88	13.40	XXX
72170		A	X-ray exam of pelvis	0.17	0.51	0.56	NA	NA	0.03	0.71	0.76	NA	NA	XXX
72170	26	A	X-ray exam of pelvis	0.17	0.06	0.06	0.06	0.06	0.01	0.24	0.24	0.24	0.24	XXX
72170	TC	A	X-ray exam of pelvis	0.00	0.45	0.50	NA	NA	0.02	0.47	0.52	NA	NA	XXX
72190		A	X-ray exam of pelvis	0.21	0.87	0.77	NA	NA	0.05	1.13	1.03	NA	NA	XXX
72190	26	A	X-ray exam of pelvis	0.21	0.07	0.07	0.07	0.07	0.01	0.29	0.29	0.29	0.29	XXX
72190	TC	A	X-ray exam of pelvis	0.00	0.80	0.70	NA	NA	0.04	0.84	0.74	NA	NA	XXX
72191		A	Ct angiograph pelv w/o&w/dye	1.81	11.92	12.48	NA	NA	0.47	14.20	14.76	NA	NA	XXX
72191	26	A	Ct angiograph pelv w/o&w/dye	1.81	0.65	0.61	0.65	0.61	0.08	2.54	2.50	2.54	2.50	XXX
72191	TC	A	Ct angiograph pelv w/o&w/dye	0.00	11.26	11.86	NA	NA	0.39	11.65	12.25	NA	NA	XXX
72192		A	Ct pelvis w/o dye	1.09	6.29	6.29	NA	NA	0.36	7.74	7.74	NA	NA	XXX
72192	26	A	Ct pelvis w/o dye	1.09	0.38	0.37	0.38	0.37	0.05	1.52	1.51	1.52	1.51	XXX
72192	TC	A	Ct pelvis w/o dye	0.00	5.91	5.93	NA	NA	0.31	6.22	6.24	NA	NA	XXX
72193		A	Ct pelvis w/dye	1.16	7.88	7.40	NA	NA	0.41	9.45	8.97	NA	NA	XXX
72193	26	A	Ct pelvis w/dye	1.16	0.40	0.39	0.40	0.39	0.05	1.61	1.60	1.61	1.60	XXX
72193	TC	A	Ct pelvis w/dye	0.00	7.48	7.02	NA	NA	0.36	7.84	7.38	NA	NA	XXX
72194		A	Ct pelvis w/o & w/dye	1.22	10.57	9.33	NA	NA	0.48	12.27	11.03	NA	NA	XXX
72194	26	A	Ct pelvis w/o & w/dye	1.22	0.43	0.41	0.43	0.41	0.05	1.70	1.68	1.70	1.68	XXX
72194	TC	A	Ct pelvis w/o & w/dye	0.00	10.14	8.92	NA	NA	0.43	10.57	9.35	NA	NA	XXX
72195		A	Mri pelvis w/o dye	1.46	15.17	12.58	NA	NA	0.51	17.14	14.55	NA	NA	XXX
72195	26	A	Mri pelvis w/o dye	1.46	0.52	0.49	0.52	0.49	0.06	2.04	2.01	2.04	2.01	XXX
72195	TC	A	Mri pelvis w/o dye	0.00	14.65	12.09	NA	NA	0.45	15.10	12.54	NA	NA	XXX
72196		A	Mri pelvis w/dye	1.73	16.25	14.60	NA	NA	0.60	18.58	16.93	NA	NA	XXX
72196	26	A	Mri pelvis w/dye	1.73	0.61	0.58	0.61	0.58	0.08	2.42	2.39	2.42	2.39	XXX
72196	TC	A	Mri pelvis w/dye	0.00	15.64	14.02	NA	NA	0.52	16.16	14.54	NA	NA	XXX
72197		A	Mri pelvis w/o & w/dye	2.26	19.94	24.25	NA	NA	1.02	23.22	27.53	NA	NA	XXX
72197	26	A	Mri pelvis w/o & w/dye	2.26	0.80	0.76	0.80	0.76	0.10	3.16	3.12	3.16	3.12	XXX
72197	TC	A	Mri pelvis w/o & w/dye	0.00	19.14	23.50	NA	NA	0.92	20.06	24.42	NA	NA	XXX
72198		A	Mr angio pelvis w/o & w/dye	1.80	15.89	12.84	NA	NA	0.67	18.36	15.31	NA	NA	XXX
72198	26	A	Mr angio pelvis w/o & w/dye	1.80	0.65	0.61	0.65	0.61	0.08	2.53	2.49	2.53	2.49	XXX
72198	TC	A	Mr angio pelvis w/o & w/dye	0.00	15.25	12.24	NA	NA	0.59	15.84	12.83	NA	NA	XXX
72200		A	X-ray exam sacroiliac joints	0.17	0.62	0.59	NA	NA	0.03	0.82	0.79	NA	NA	XXX
72200	26	A	X-ray exam sacroiliac joints	0.17	0.06	0.06	0.06	0.06	0.01	0.24	0.24	0.24	0.24	XXX
72200	TC	A	X-ray exam sacroiliac joints	0.00	0.56	0.53	NA	NA	0.02	0.58	0.55	NA	NA	XXX
72202		A	X-ray exam sacroiliac joints	0.19	0.76	0.70	NA	NA	0.05	1.00	0.94	NA	NA	XXX
72202	26	A	X-ray exam sacroiliac joints	0.19	0.06	0.06	0.06	0.06	0.01	0.26	0.26	0.26	0.26	XXX
72202	TC	A	X-ray exam sacroiliac joints	0.00	0.70	0.64	NA	NA	0.04	0.74	0.68	NA	NA	XXX
72220		A	X-ray exam of tailbone	0.17	0.60	0.62	NA	NA	0.05	0.82	0.84	NA	NA	XXX
72220	26	A	X-ray exam of tailbone	0.17	0.05	0.06	0.05	0.06	0.01	0.23	0.24	0.23	0.24	XXX
72220	TC	A	X-ray exam of tailbone	0.00	0.54	0.56	NA	NA	0.04	0.58	0.60	NA	NA	XXX
72240		A	Contrast x-ray of neck spine	0.91	2.64	4.45	NA	NA	0.29	3.84	5.65	NA	NA	XXX
72240	26	A	Contrast x-ray of neck spine	0.91	0.31	0.30	0.31	0.30	0.04	1.26	1.25	1.26	1.25	XXX
72240	TC	A	Contrast x-ray of neck spine	0.00	2.33	4.15	NA	NA	0.25	2.58	4.40	NA	NA	XXX
72255		A	Contrast x-ray, thorax spine	0.91	2.35	4.05	NA	NA	0.26	3.52	5.22	NA	NA	XXX
72255	26	A	Contrast x-ray, thorax spine	0.91	0.29	0.28	0.29	0.28	0.04	1.24	1.23	1.24	1.23	XXX
72255	TC	A	Contrast x-ray, thorax spine	0.00	2.06	3.77	NA	NA	0.22	2.28	3.99	NA	NA	XXX
72265		A	Contrast x-ray, lower spine	0.83	2.61	3.90	NA	NA	0.26	3.70	4.99	NA	NA	XXX
72265	26	A	Contrast x-ray, lower spine	0.83	0.28	0.26	0.28	0.26	0.04	1.15	1.13	1.15	1.13	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
72265	TC	A	Contrast x-ray, lower spine	0.00	2.33	3.64	NA	NA	0.22	2.55	3.86	NA	NA	XXX
72270		A	Contrast x-ray, spine	1.33	4.13	5.94	NA	NA	0.39	5.85	7.66	NA	NA	XXX
72270	26	A	Contrast x-ray, spine	1.33	0.47	0.43	0.47	0.43	0.06	1.86	1.82	1.86	1.82	XXX
72270	TC	A	Contrast x-ray, spine	0.00	3.66	5.51	NA	NA	0.33	3.99	5.84	NA	NA	XXX
72275		A	Epidurography	0.76	1.72	2.16	NA	NA	0.26	2.74	3.18	NA	NA	XXX
72275	26	A	Epidurography	0.76	0.19	0.20	0.19	0.20	0.04	0.99	1.00	0.99	1.00	XXX
72275	TC	A	Epidurography	0.00	1.53	1.97	NA	NA	0.22	1.75	2.19	NA	NA	XXX
72285		A	X-ray c/t spine disk	1.16	1.45	6.93	NA	NA	0.50	3.11	8.59	NA	NA	XXX
72285	26	A	X-ray c/t spine disk	1.16	0.30	0.35	0.30	0.35	0.07	1.53	1.58	1.53	1.58	XXX
72285	TC	A	X-ray c/t spine disk	0.00	1.15	6.59	NA	NA	0.43	1.58	7.02	NA	NA	XXX
72295		A	X-ray of lower spine disk	0.83	1.43	6.47	NA	NA	0.46	2.72	7.76	NA	NA	XXX
72295	26	A	X-ray of lower spine disk	0.83	0.23	0.26	0.23	0.26	0.06	1.12	1.15	1.12	1.15	XXX
72295	TC	A	X-ray of lower spine disk	0.00	1.20	6.21	NA	NA	0.40	1.60	6.61	NA	NA	XXX
73000		A	X-ray exam of collar bone	0.16	0.57	0.57	NA	NA	0.03	0.76	0.76	NA	NA	XXX
73000	26	A	X-ray exam of collar bone	0.16	0.05	0.05	0.05	0.05	0.01	0.22	0.22	0.22	0.22	XXX
73000	TC	A	X-ray exam of collar bone	0.00	0.51	0.52	NA	NA	0.02	0.53	0.54	NA	NA	XXX
73010		A	X-ray exam of shoulder blade	0.17	0.59	0.58	NA	NA	0.03	0.79	0.78	NA	NA	XXX
73010	26	A	X-ray exam of shoulder blade	0.17	0.06	0.06	0.06	0.06	0.01	0.24	0.24	0.24	0.24	XXX
73010	TC	A	X-ray exam of shoulder blade	0.00	0.53	0.52	NA	NA	0.02	0.55	0.54	NA	NA	XXX
73020		A	X-ray exam of shoulder	0.15	0.46	0.51	NA	NA	0.03	0.64	0.69	NA	NA	XXX
73020	26	A	X-ray exam of shoulder	0.15	0.05	0.05	0.05	0.05	0.01	0.21	0.21	0.21	0.21	XXX
73020	TC	A	X-ray exam of shoulder	0.00	0.40	0.45	NA	NA	0.02	0.42	0.47	NA	NA	XXX
73030		A	X-ray exam of shoulder	0.18	0.58	0.62	NA	NA	0.05	0.81	0.85	NA	NA	XXX
73030	26	A	X-ray exam of shoulder	0.18	0.06	0.06	0.06	0.06	0.01	0.25	0.25	0.25	0.25	XXX
73030	TC	A	X-ray exam of shoulder	0.00	0.52	0.56	NA	NA	0.04	0.56	0.60	NA	NA	XXX
73040		A	Contrast x-ray of shoulder	0.54	2.31	2.30	NA	NA	0.14	2.99	2.98	NA	NA	XXX
73040	26	A	Contrast x-ray of shoulder	0.54	0.19	0.18	0.19	0.18	0.02	0.75	0.74	0.75	0.74	XXX
73040	TC	A	Contrast x-ray of shoulder	0.00	2.13	2.12	NA	NA	0.12	2.25	2.24	NA	NA	XXX
73050		A	X-ray exam of shoulders	0.20	0.74	0.74	NA	NA	0.05	0.99	0.99	NA	NA	XXX
73050	26	A	X-ray exam of shoulders	0.20	0.07	0.07	0.07	0.07	0.01	0.28	0.28	0.28	0.28	XXX
73050	TC	A	X-ray exam of shoulders	0.00	0.67	0.67	NA	NA	0.04	0.71	0.71	NA	NA	XXX
73060		A	X-ray exam of humerus	0.17	0.59	0.62	NA	NA	0.05	0.81	0.84	NA	NA	XXX
73060	26	A	X-ray exam of humerus	0.17	0.06	0.06	0.06	0.06	0.01	0.24	0.24	0.24	0.24	XXX
73060	TC	A	X-ray exam of humerus	0.00	0.53	0.56	NA	NA	0.04	0.57	0.60	NA	NA	XXX
73070		A	X-ray exam of elbow	0.15	0.57	0.57	NA	NA	0.03	0.75	0.75	NA	NA	XXX
73070	26	A	X-ray exam of elbow	0.15	0.05	0.05	0.05	0.05	0.01	0.21	0.21	0.21	0.21	XXX
73070	TC	A	X-ray exam of elbow	0.00	0.52	0.52	NA	NA	0.02	0.54	0.54	NA	NA	XXX
73080		A	X-ray exam of elbow	0.17	0.78	0.67	NA	NA	0.05	1.00	0.89	NA	NA	XXX
73080	26	A	X-ray exam of elbow	0.17	0.06	0.06	0.06	0.06	0.01	0.24	0.24	0.24	0.24	XXX
73080	TC	A	X-ray exam of elbow	0.00	0.72	0.61	NA	NA	0.04	0.76	0.65	NA	NA	XXX
73085		A	Contrast x-ray of elbow	0.54	1.86	2.19	NA	NA	0.14	2.54	2.87	NA	NA	XXX
73085	26	A	Contrast x-ray of elbow	0.54	0.17	0.19	0.17	0.19	0.02	0.73	0.75	0.73	0.75	XXX
73085	TC	A	Contrast x-ray of elbow	0.00	1.69	2.01	NA	NA	0.12	1.81	2.13	NA	NA	XXX
73090		A	X-ray exam of forearm	0.16	0.57	0.57	NA	NA	0.03	0.76	0.76	NA	NA	XXX
73090	26	A	X-ray exam of forearm	0.16	0.05	0.05	0.05	0.05	0.01	0.22	0.22	0.22	0.22	XXX
73090	TC	A	X-ray exam of forearm	0.00	0.52	0.52	NA	NA	0.02	0.54	0.54	NA	NA	XXX
73092		A	X-ray exam of arm, infant	0.16	0.60	0.56	NA	NA	0.03	0.79	0.75	NA	NA	XXX
73092	26	A	X-ray exam of arm, infant	0.16	0.05	0.05	0.05	0.05	0.01	0.22	0.22	0.22	0.22	XXX
73092	TC	A	X-ray exam of arm, infant	0.00	0.55	0.51	NA	NA	0.02	0.57	0.53	NA	NA	XXX
73100		A	X-ray exam of wrist	0.16	0.61	0.56	NA	NA	0.03	0.80	0.75	NA	NA	XXX
73100	26	A	X-ray exam of wrist	0.16	0.06	0.05	0.06	0.05	0.01	0.23	0.22	0.23	0.22	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
73100	TC	A	X-ray exam of wrist	0.00	0.56	0.51	NA	NA	0.02	0.58	0.53	NA	NA	XXX
73110		A	X-ray exam of wrist	0.17	0.79	0.64	NA	NA	0.03	0.99	0.84	NA	NA	XXX
73110	26	A	X-ray exam of wrist	0.17	0.06	0.06	0.06	0.06	0.01	0.24	0.24	0.24	0.24	XXX
73110	TC	A	X-ray exam of wrist	0.00	0.74	0.58	NA	NA	0.02	0.76	0.60	NA	NA	XXX
73115		A	Contrast x-ray of wrist	0.54	2.41	1.92	NA	NA	0.12	3.07	2.58	NA	NA	XXX
73115	26	A	Contrast x-ray of wrist	0.54	0.19	0.18	0.19	0.18	0.02	0.75	0.74	0.75	0.74	XXX
73115	TC	A	Contrast x-ray of wrist	0.00	2.23	1.74	NA	NA	0.10	2.33	1.84	NA	NA	XXX
73120		A	X-ray exam of hand	0.16	0.57	0.55	NA	NA	0.03	0.76	0.74	NA	NA	XXX
73120	26	A	X-ray exam of hand	0.16	0.05	0.05	0.05	0.05	0.01	0.22	0.22	0.22	0.22	XXX
73120	TC	A	X-ray exam of hand	0.00	0.52	0.50	NA	NA	0.02	0.54	0.52	NA	NA	XXX
73130		A	X-ray exam of hand	0.17	0.68	0.61	NA	NA	0.03	0.88	0.81	NA	NA	XXX
73130	26	A	X-ray exam of hand	0.17	0.06	0.06	0.06	0.06	0.01	0.24	0.24	0.24	0.24	XXX
73130	TC	A	X-ray exam of hand	0.00	0.62	0.55	NA	NA	0.02	0.64	0.57	NA	NA	XXX
73140		A	X-ray exam of finger(s)	0.13	0.69	0.52	NA	NA	0.03	0.85	0.68	NA	NA	XXX
73140	26	A	X-ray exam of finger(s)	0.13	0.05	0.04	0.05	0.04	0.01	0.19	0.18	0.19	0.18	XXX
73140	TC	A	X-ray exam of finger(s)	0.00	0.65	0.48	NA	NA	0.02	0.67	0.50	NA	NA	XXX
73200		A	Ct upper extremity w/o dye	1.09	6.69	5.67	NA	NA	0.30	8.08	7.06	NA	NA	XXX
73200	26	A	Ct upper extremity w/o dye	1.09	0.38	0.37	0.38	0.37	0.05	1.52	1.51	1.52	1.51	XXX
73200	TC	A	Ct upper extremity w/o dye	0.00	6.31	5.31	NA	NA	0.25	6.56	5.56	NA	NA	XXX
73201		A	Ct upper extremity w/dye	1.16	8.28	6.80	NA	NA	0.36	9.80	8.32	NA	NA	XXX
73201	26	A	Ct upper extremity w/dye	1.16	0.41	0.39	0.41	0.39	0.05	1.62	1.60	1.62	1.60	XXX
73201	TC	A	Ct upper extremity w/dye	0.00	7.87	6.42	NA	NA	0.31	8.18	6.73	NA	NA	XXX
73202		A	Ct uppr extremity w/o&w/dye	1.22	11.14	8.67	NA	NA	0.44	12.80	10.33	NA	NA	XXX
73202	26	A	Ct uppr extremity w/o&w/dye	1.22	0.43	0.41	0.43	0.41	0.05	1.70	1.68	1.70	1.68	XXX
73202	TC	A	Ct uppr extremity w/o&w/dye	0.00	10.72	8.26	NA	NA	0.39	11.11	8.65	NA	NA	XXX
73206		A	Ct angio upr extrm w/o&w/dye	1.81	11.30	11.51	NA	NA	0.47	13.58	13.79	NA	NA	XXX
73206	26	A	Ct angio upr extrm w/o&w/dye	1.81	0.65	0.61	0.65	0.61	0.08	2.54	2.50	2.54	2.50	XXX
73206	TC	A	Ct angio upr extrm w/o&w/dye	0.00	10.65	10.91	NA	NA	0.39	11.04	11.30	NA	NA	XXX
73218		A	Mri upper extremity w/o dye	1.35	15.36	12.59	NA	NA	0.45	17.16	14.39	NA	NA	XXX
73218	26	A	Mri upper extremity w/o dye	1.35	0.47	0.45	0.47	0.45	0.06	1.88	1.86	1.88	1.86	XXX
73218	TC	A	Mri upper extremity w/o dye	0.00	14.89	12.15	NA	NA	0.39	15.28	12.54	NA	NA	XXX
73219		A	Mri upper extremity w/dye	1.62	16.17	14.56	NA	NA	0.54	18.33	16.72	NA	NA	XXX
73219	26	A	Mri upper extremity w/dye	1.62	0.57	0.55	0.57	0.55	0.07	2.26	2.24	2.26	2.24	XXX
73219	TC	A	Mri upper extremity w/dye	0.00	15.60	14.01	NA	NA	0.47	16.07	14.48	NA	NA	XXX
73220		A	Mri uppr extremity w/o&w/dye	2.15	20.02	24.25	NA	NA	0.94	23.11	27.34	NA	NA	XXX
73220	26	A	Mri uppr extremity w/o&w/dye	2.15	0.75	0.72	0.75	0.72	0.10	3.00	2.97	3.00	2.97	XXX
73220	TC	A	Mri uppr extremity w/o&w/dye	0.00	19.27	23.53	NA	NA	0.84	20.11	24.37	NA	NA	XXX
73221		A	Mri joint upr extrem w/o dye	1.35	14.27	12.32	NA	NA	0.45	16.07	14.12	NA	NA	XXX
73221	26	A	Mri joint upr extrem w/o dye	1.35	0.48	0.45	0.48	0.45	0.06	1.89	1.86	1.89	1.86	XXX
73221	TC	A	Mri joint upr extrem w/o dye	0.00	13.79	11.87	NA	NA	0.39	14.18	12.26	NA	NA	XXX
73222		A	Mri joint upr extrem w/dye	1.62	15.10	14.28	NA	NA	0.54	17.26	16.44	NA	NA	XXX
73222	26	A	Mri joint upr extrem w/dye	1.62	0.58	0.54	0.58	0.54	0.07	2.27	2.23	2.27	2.23	XXX
73222	TC	A	Mri joint upr extrem w/dye	0.00	14.52	13.74	NA	NA	0.47	14.99	14.21	NA	NA	XXX
73223		A	Mri joint upr extr w/o&w/dye	2.15	18.54	23.88	NA	NA	0.94	21.63	26.97	NA	NA	XXX
73223	26	A	Mri joint upr extr w/o&w/dye	2.15	0.75	0.72	0.75	0.72	0.10	3.00	2.97	3.00	2.97	XXX
73223	TC	A	Mri joint upr extr w/o&w/dye	0.00	17.79	23.16	NA	NA	0.84	18.63	24.00	NA	NA	XXX
73225		N	Mr angio upr extr w/o&w/dye	1.73	14.63	12.44	14.63	12.44	0.69	17.05	14.86	17.05	14.86	XXX
73225	26	N	Mr angio upr extr w/o&w/dye	1.73	0.39	0.60	0.39	0.60	0.10	2.22	2.43	2.22	2.43	XXX
73225	TC	N	Mr angio upr extr w/o&w/dye	0.00	14.24	11.84	14.24	11.84	0.59	14.83	12.43	14.83	12.43	XXX
73500		A	X-ray exam of hip	0.17	0.50	0.52	NA	NA	0.03	0.70	0.72	NA	NA	XXX
73500	26	A	X-ray exam of hip	0.17	0.06	0.06	0.06	0.06	0.01	0.24	0.24	0.24	0.24	XXX
73500	TC	A	X-ray exam of hip	0.00	0.44	0.46	NA	NA	0.02	0.46	0.48	NA	NA	XXX
73510		A	X-ray exam of hip	0.21	0.80	0.68	NA	NA	0.05	1.06	0.94	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
73510	26	A	X-ray exam of hip	0.21	0.07	0.07	0.07	0.07	0.01	0.29	0.29	0.29	0.29	XXX
73510	TC	A	X-ray exam of hip	0.00	0.73	0.61	NA	NA	0.04	0.77	0.65	NA	NA	XXX
73520		A	X-ray exam of hips	0.26	0.81	0.77	NA	NA	0.05	1.12	1.08	NA	NA	XXX
73520	26	A	X-ray exam of hips	0.26	0.09	0.09	0.09	0.09	0.01	0.36	0.36	0.36	0.36	XXX
73520	TC	A	X-ray exam of hips	0.00	0.72	0.68	NA	NA	0.04	0.76	0.72	NA	NA	XXX
73525		A	Contrast x-ray of hip	0.54	1.83	2.18	NA	NA	0.15	2.52	2.87	NA	NA	XXX
73525	26	A	Contrast x-ray of hip	0.54	0.18	0.18	0.18	0.18	0.03	0.75	0.75	0.75	0.75	XXX
73525	TC	A	Contrast x-ray of hip	0.00	1.66	2.00	NA	NA	0.12	1.78	2.12	NA	NA	XXX
73530		A	X-ray exam of hip	0.29	0.10	0.49	NA	NA	0.03	0.42	0.81	NA	NA	XXX
73530	26	A	X-ray exam of hip	0.29	0.10	0.10	0.10	0.10	0.01	0.40	0.40	0.40	0.40	XXX
73530	TC	A	X-ray exam of hip	0.00	0.00	0.39	NA	NA	0.02	0.02	0.41	NA	NA	XXX
73540		A	X-ray exam of pelvis & hips	0.20	0.80	0.68	NA	NA	0.05	1.05	0.93	NA	NA	XXX
73540	26	A	X-ray exam of pelvis & hips	0.20	0.07	0.07	0.07	0.07	0.01	0.28	0.28	0.28	0.28	XXX
73540	TC	A	X-ray exam of pelvis & hips	0.00	0.74	0.61	NA	NA	0.04	0.78	0.65	NA	NA	XXX
73542		A	X-ray exam, sacroiliac joint	0.59	1.11	1.98	NA	NA	0.15	1.85	2.72	NA	NA	XXX
73542	26	A	X-ray exam, sacroiliac joint	0.59	0.14	0.16	0.14	0.16	0.03	0.76	0.78	0.76	0.78	XXX
73542	TC	A	X-ray exam, sacroiliac joint	0.00	0.98	1.83	NA	NA	0.12	1.10	1.95	NA	NA	XXX
73550		A	X-ray exam of thigh	0.17	0.56	0.61	NA	NA	0.05	0.78	0.83	NA	NA	XXX
73550	26	A	X-ray exam of thigh	0.17	0.06	0.06	0.06	0.06	0.01	0.24	0.24	0.24	0.24	XXX
73550	TC	A	X-ray exam of thigh	0.00	0.50	0.55	NA	NA	0.04	0.54	0.59	NA	NA	XXX
73560		A	X-ray exam of knee, 1 or 2	0.17	0.60	0.59	NA	NA	0.03	0.80	0.79	NA	NA	XXX
73560	26	A	X-ray exam of knee, 1 or 2	0.17	0.06	0.06	0.06	0.06	0.01	0.24	0.24	0.24	0.24	XXX
73560	TC	A	X-ray exam of knee, 1 or 2	0.00	0.54	0.53	NA	NA	0.02	0.56	0.55	NA	NA	XXX
73562		A	X-ray exam of knee, 3	0.18	0.74	0.66	NA	NA	0.05	0.97	0.89	NA	NA	XXX
73562	26	A	X-ray exam of knee, 3	0.18	0.06	0.06	0.06	0.06	0.01	0.25	0.25	0.25	0.25	XXX
73562	TC	A	X-ray exam of knee, 3	0.00	0.68	0.60	NA	NA	0.04	0.72	0.64	NA	NA	XXX
73564		A	X-ray exam, knee, 4 or more	0.22	0.88	0.74	NA	NA	0.05	1.15	1.01	NA	NA	XXX
73564	26	A	X-ray exam, knee, 4 or more	0.22	0.08	0.07	0.08	0.07	0.01	0.31	0.30	0.31	0.30	XXX
73564	TC	A	X-ray exam, knee, 4 or more	0.00	0.80	0.67	NA	NA	0.04	0.84	0.71	NA	NA	XXX
73565		A	X-ray exam of knees	0.17	0.65	0.58	NA	NA	0.03	0.85	0.78	NA	NA	XXX
73565	26	A	X-ray exam of knees	0.17	0.06	0.06	0.06	0.06	0.01	0.24	0.24	0.24	0.24	XXX
73565	TC	A	X-ray exam of knees	0.00	0.59	0.52	NA	NA	0.02	0.61	0.54	NA	NA	XXX
73580		A	Contrast x-ray of knee joint	0.54	2.41	2.70	NA	NA	0.17	3.12	3.41	NA	NA	XXX
73580	26	A	Contrast x-ray of knee joint	0.54	0.18	0.17	0.18	0.17	0.03	0.75	0.74	0.75	0.74	XXX
73580	TC	A	Contrast x-ray of knee joint	0.00	2.23	2.53	NA	NA	0.14	2.37	2.67	NA	NA	XXX
73590		A	X-ray exam of lower leg	0.17	0.55	0.57	NA	NA	0.03	0.75	0.77	NA	NA	XXX
73590	26	A	X-ray exam of lower leg	0.17	0.06	0.06	0.06	0.06	0.01	0.24	0.24	0.24	0.24	XXX
73590	TC	A	X-ray exam of lower leg	0.00	0.50	0.52	NA	NA	0.02	0.52	0.54	NA	NA	XXX
73592		A	X-ray exam of leg, infant	0.16	0.61	0.56	NA	NA	0.03	0.80	0.75	NA	NA	XXX
73592	26	A	X-ray exam of leg, infant	0.16	0.05	0.05	0.05	0.05	0.01	0.22	0.22	0.22	0.22	XXX
73592	TC	A	X-ray exam of leg, infant	0.00	0.56	0.51	NA	NA	0.02	0.58	0.53	NA	NA	XXX
73600		A	X-ray exam of ankle	0.16	0.57	0.55	NA	NA	0.03	0.76	0.74	NA	NA	XXX
73600	26	A	X-ray exam of ankle	0.16	0.05	0.05	0.05	0.05	0.01	0.22	0.22	0.22	0.22	XXX
73600	TC	A	X-ray exam of ankle	0.00	0.52	0.50	NA	NA	0.02	0.54	0.52	NA	NA	XXX
73610		A	X-ray exam of ankle	0.17	0.69	0.62	NA	NA	0.03	0.89	0.82	NA	NA	XXX
73610	26	A	X-ray exam of ankle	0.17	0.06	0.06	0.06	0.06	0.01	0.24	0.24	0.24	0.24	XXX
73610	TC	A	X-ray exam of ankle	0.00	0.63	0.56	NA	NA	0.02	0.65	0.58	NA	NA	XXX
73615		A	Contrast x-ray of ankle	0.54	1.92	2.20	NA	NA	0.15	2.61	2.89	NA	NA	XXX
73615	26	A	Contrast x-ray of ankle	0.54	0.17	0.18	0.17	0.18	0.03	0.74	0.75	0.74	0.75	XXX
73615	TC	A	Contrast x-ray of ankle	0.00	1.75	2.02	NA	NA	0.12	1.87	2.14	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
73620		A	X-ray exam of foot	0.16	0.53	0.54	NA	NA	0.03	0.72	0.73	NA	NA	XXX
73620	26	A	X-ray exam of foot	0.16	0.04	0.05	0.04	0.05	0.01	0.21	0.22	0.21	0.22	XXX
73620	TC	A	X-ray exam of foot	0.00	0.49	0.49	NA	NA	0.02	0.51	0.51	NA	NA	XXX
73630		A	X-ray exam of foot	0.17	0.67	0.61	NA	NA	0.03	0.87	0.81	NA	NA	XXX
73630	26	A	X-ray exam of foot	0.17	0.05	0.06	0.05	0.06	0.01	0.23	0.24	0.23	0.24	XXX
73630	TC	A	X-ray exam of foot	0.00	0.61	0.55	NA	NA	0.02	0.63	0.57	NA	NA	XXX
73650		A	X-ray exam of heel	0.16	0.56	0.53	NA	NA	0.03	0.75	0.72	NA	NA	XXX
73650	26	A	X-ray exam of heel	0.16	0.05	0.05	0.05	0.05	0.01	0.22	0.22	0.22	0.22	XXX
73650	TC	A	X-ray exam of heel	0.00	0.51	0.48	NA	NA	0.02	0.53	0.50	NA	NA	XXX
73660		A	X-ray exam of toe(s)	0.13	0.65	0.51	NA	NA	0.03	0.81	0.67	NA	NA	XXX
73660	26	A	X-ray exam of toe(s)	0.13	0.04	0.04	0.04	0.04	0.01	0.18	0.18	0.18	0.18	XXX
73660	TC	A	X-ray exam of toe(s)	0.00	0.61	0.47	NA	NA	0.02	0.63	0.49	NA	NA	XXX
73700		A	Ct lower extremity w/o dye	1.09	6.70	5.67	NA	NA	0.30	8.09	7.06	NA	NA	XXX
73700	26	A	Ct lower extremity w/o dye	1.09	0.38	0.37	0.38	0.37	0.05	1.52	1.51	1.52	1.51	XXX
73700	TC	A	Ct lower extremity w/o dye	0.00	6.32	5.31	NA	NA	0.25	6.57	5.56	NA	NA	XXX
73701		A	Ct lower extremity w/dye	1.16	8.32	6.81	NA	NA	0.36	9.84	8.33	NA	NA	XXX
73701	26	A	Ct lower extremity w/dye	1.16	0.40	0.39	0.40	0.39	0.05	1.61	1.60	1.61	1.60	XXX
73701	TC	A	Ct lower extremity w/dye	0.00	7.91	6.43	NA	NA	0.31	8.22	6.74	NA	NA	XXX
73702		A	Ct lwr extremity w/o&w/dye	1.22	11.20	8.68	NA	NA	0.44	12.86	10.34	NA	NA	XXX
73702	26	A	Ct lwr extremity w/o&w/dye	1.22	0.44	0.41	0.44	0.41	0.05	1.71	1.68	1.71	1.68	XXX
73702	TC	A	Ct lwr extremity w/o&w/dye	0.00	10.76	8.27	NA	NA	0.39	11.15	8.66	NA	NA	XXX
73706		A	Ct angio lwr extr w/o&w/dye	1.90	12.85	11.92	NA	NA	0.47	15.22	14.29	NA	NA	XXX
73706	26	A	Ct angio lwr extr w/o&w/dye	1.90	0.71	0.64	0.71	0.64	0.08	2.69	2.62	2.69	2.62	XXX
73706	TC	A	Ct angio lwr extr w/o&w/dye	0.00	12.14	11.28	NA	NA	0.39	12.53	11.67	NA	NA	XXX
73718		A	Mri lower extremity w/o dye	1.35	15.09	12.53	NA	NA	0.45	16.89	14.33	NA	NA	XXX
73718	26	A	Mri lower extremity w/o dye	1.35	0.48	0.45	0.48	0.45	0.06	1.89	1.86	1.89	1.86	XXX
73718	TC	A	Mri lower extremity w/o dye	0.00	14.61	12.08	NA	NA	0.39	15.00	12.47	NA	NA	XXX
73719		A	Mri lower extremity w/dye	1.62	16.15	14.55	NA	NA	0.54	18.31	16.71	NA	NA	XXX
73719	26	A	Mri lower extremity w/dye	1.62	0.57	0.54	0.57	0.54	0.07	2.26	2.23	2.26	2.23	XXX
73719	TC	A	Mri lower extremity w/dye	0.00	15.58	14.01	NA	NA	0.47	16.05	14.48	NA	NA	XXX
73720		A	Mri lwr extremity w/o&w/dye	2.15	19.99	24.24	NA	NA	0.94	23.08	27.33	NA	NA	XXX
73720	26	A	Mri lwr extremity w/o&w/dye	2.15	0.75	0.71	0.75	0.71	0.10	3.00	2.96	3.00	2.96	XXX
73720	TC	A	Mri lwr extremity w/o&w/dye	0.00	19.24	23.52	NA	NA	0.84	20.08	24.36	NA	NA	XXX
73721		A	Mri jnt of lwr extre w/o dye	1.35	14.61	12.41	NA	NA	0.45	16.41	14.21	NA	NA	XXX
73721	26	A	Mri jnt of lwr extre w/o dye	1.35	0.48	0.45	0.48	0.45	0.06	1.89	1.86	1.89	1.86	XXX
73721	TC	A	Mri jnt of lwr extre w/o dye	0.00	14.13	11.96	NA	NA	0.39	14.52	12.35	NA	NA	XXX
73722		A	Mri joint of lwr extr w/dye	1.62	15.29	14.33	NA	NA	0.54	17.45	16.49	NA	NA	XXX
73722	26	A	Mri joint of lwr extr w/dye	1.62	0.58	0.54	0.58	0.54	0.07	2.27	2.23	2.27	2.23	XXX
73722	TC	A	Mri joint of lwr extr w/dye	0.00	14.71	13.79	NA	NA	0.47	15.18	14.26	NA	NA	XXX
73723		A	Mri joint lwr extr w/o&w/dye	2.15	18.48	23.87	NA	NA	0.94	21.57	26.96	NA	NA	XXX
73723	26	A	Mri joint lwr extr w/o&w/dye	2.15	0.75	0.72	0.75	0.72	0.10	3.00	2.97	3.00	2.97	XXX
73723	TC	A	Mri joint lwr extr w/o&w/dye	0.00	17.73	23.15	NA	NA	0.84	18.57	23.99	NA	NA	XXX
73725		R	Mr ang lwr ext w or w/o dye	1.82	15.93	12.86	NA	NA	0.67	18.42	15.35	NA	NA	XXX
73725	26	R	Mr ang lwr ext w or w/o dye	1.82	0.65	0.61	0.65	0.61	0.08	2.55	2.51	2.55	2.51	XXX
73725	TC	R	Mr ang lwr ext w or w/o dye	0.00	15.28	12.24	NA	NA	0.59	15.87	12.83	NA	NA	XXX
74000		A	X-ray exam of abdomen	0.18	0.48	0.56	NA	NA	0.03	0.69	0.77	NA	NA	XXX
74000	26	A	X-ray exam of abdomen	0.18	0.06	0.06	0.06	0.06	0.01	0.25	0.25	0.25	0.25	XXX
74000	TC	A	X-ray exam of abdomen	0.00	0.42	0.50	NA	NA	0.02	0.44	0.52	NA	NA	XXX
74010		A	X-ray exam of abdomen	0.23	0.82	0.69	NA	NA	0.05	1.10	0.97	NA	NA	XXX
74010	26	A	X-ray exam of abdomen	0.23	0.08	0.08	0.08	0.08	0.01	0.32	0.32	0.32	0.32	XXX
74010	TC	A	X-ray exam of abdomen	0.00	0.74	0.61	NA	NA	0.04	0.78	0.65	NA	NA	XXX
74020		A	X-ray exam of abdomen	0.27	0.84	0.74	NA	NA	0.05	1.16	1.06	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
74020	26	A	X-ray exam of abdomen	0.27	0.09	0.09	0.09	0.09	0.01	0.37	0.37	0.37	0.37	XXX
74020	TC	A	X-ray exam of abdomen	0.00	0.75	0.65	NA	NA	0.04	0.79	0.69	NA	NA	XXX
74022		A	X-ray exam series, abdomen	0.32	1.02	0.88	NA	NA	0.06	1.40	1.26	NA	NA	XXX
74022	26	A	X-ray exam series, abdomen	0.32	0.11	0.10	0.11	0.10	0.01	0.44	0.43	0.44	0.43	XXX
74022	TC	A	X-ray exam series, abdomen	0.00	0.91	0.78	NA	NA	0.05	0.96	0.83	NA	NA	XXX
74150		A	Ct abdomen w/o dye	1.19	6.33	6.14	NA	NA	0.35	7.87	7.68	NA	NA	XXX
74150	26	A	Ct abdomen w/o dye	1.19	0.41	0.40	0.41	0.40	0.05	1.65	1.64	1.65	1.64	XXX
74150	TC	A	Ct abdomen w/o dye	0.00	5.91	5.74	NA	NA	0.30	6.21	6.04	NA	NA	XXX
74160		A	Ct abdomen w/dye	1.27	9.21	7.76	NA	NA	0.42	10.90	9.45	NA	NA	XXX
74160	26	A	Ct abdomen w/dye	1.27	0.44	0.43	0.44	0.43	0.06	1.77	1.76	1.77	1.76	XXX
74160	TC	A	Ct abdomen w/dye	0.00	8.77	7.34	NA	NA	0.36	9.13	7.70	NA	NA	XXX
74170		A	Ct abdomen w/o & w/dye	1.40	12.75	9.92	NA	NA	0.49	14.64	11.81	NA	NA	XXX
74170	26	A	Ct abdomen w/o & w/dye	1.40	0.49	0.47	0.49	0.47	0.06	1.95	1.93	1.95	1.93	XXX
74170	TC	A	Ct abdomen w/o & w/dye	0.00	12.26	9.45	NA	NA	0.43	12.69	9.88	NA	NA	XXX
74175		A	Ct angio abdom w/o & w/dye	1.90	12.86	12.73	NA	NA	0.47	15.23	15.10	NA	NA	XXX
74175	26	A	Ct angio abdom w/o & w/dye	1.90	0.69	0.64	0.69	0.64	0.08	2.67	2.62	2.67	2.62	XXX
74175	TC	A	Ct angio abdom w/o & w/dye	0.00	12.18	12.09	NA	NA	0.39	12.57	12.48	NA	NA	XXX
74181		A	Mri abdomen w/o dye	1.46	13.09	12.06	NA	NA	0.51	15.06	14.03	NA	NA	XXX
74181	26	A	Mri abdomen w/o dye	1.46	0.51	0.49	0.51	0.49	0.06	2.03	2.01	2.03	2.01	XXX
74181	TC	A	Mri abdomen w/o dye	0.00	12.58	11.57	NA	NA	0.45	13.03	12.02	NA	NA	XXX
74182		A	Mri abdomen w/dye	1.73	18.28	15.11	NA	NA	0.60	20.61	17.44	NA	NA	XXX
74182	26	A	Mri abdomen w/dye	1.73	0.60	0.58	0.60	0.58	0.08	2.41	2.39	2.41	2.39	XXX
74182	TC	A	Mri abdomen w/dye	0.00	17.68	14.53	NA	NA	0.52	18.20	15.05	NA	NA	XXX
74183		A	Mri abdomen w/o & w/dye	2.26	19.98	24.26	NA	NA	1.02	23.26	27.54	NA	NA	XXX
74183	26	A	Mri abdomen w/o & w/dye	2.26	0.79	0.75	0.79	0.75	0.10	3.15	3.11	3.15	3.11	XXX
74183	TC	A	Mri abdomen w/o & w/dye	0.00	19.18	23.51	NA	NA	0.92	20.10	24.43	NA	NA	XXX
74185		R	Mri angio, abdom w orw/o dye	1.80	15.88	12.84	NA	NA	0.67	18.35	15.31	NA	NA	XXX
74185	26	R	Mri angio, abdom w orw/o dye	1.80	0.64	0.60	0.64	0.60	0.08	2.52	2.48	2.52	2.48	XXX
74185	TC	R	Mri angio, abdom w orw/o dye	0.00	15.24	12.23	NA	NA	0.59	15.83	12.82	NA	NA	XXX
74190		A	X-ray exam of peritoneum	0.48	0.17	1.15	NA	NA	0.09	0.74	1.72	NA	NA	XXX
74190	26	A	X-ray exam of peritoneum	0.48	0.17	0.16	0.17	0.16	0.02	0.67	0.66	0.67	0.66	XXX
74190	TC	A	X-ray exam of peritoneum	0.00	0.00	0.98	NA	NA	0.07	0.07	1.05	NA	NA	XXX
74210		A	Contrst x-ray exam of throat	0.36	1.85	1.45	NA	NA	0.08	2.29	1.89	NA	NA	XXX
74210	26	A	Contrst x-ray exam of throat	0.36	0.12	0.12	0.12	0.12	0.02	0.50	0.50	0.50	0.50	XXX
74210	TC	A	Contrst x-ray exam of throat	0.00	1.72	1.32	NA	NA	0.06	1.78	1.38	NA	NA	XXX
74220		A	Contrast x-ray, esophagus	0.46	2.10	1.53	NA	NA	0.08	2.64	2.07	NA	NA	XXX
74220	26	A	Contrast x-ray, esophagus	0.46	0.16	0.15	0.16	0.15	0.02	0.64	0.63	0.64	0.63	XXX
74220	TC	A	Contrast x-ray, esophagus	0.00	1.94	1.38	NA	NA	0.06	2.00	1.44	NA	NA	XXX
74230		A	Cine/vid x-ray, throat/esoph	0.53	2.03	1.62	NA	NA	0.09	2.65	2.24	NA	NA	XXX
74230	26	A	Cine/vid x-ray, throat/esoph	0.53	0.18	0.17	0.18	0.17	0.02	0.73	0.72	0.73	0.72	XXX
74230	TC	A	Cine/vid x-ray, throat/esoph	0.00	1.84	1.44	NA	NA	0.07	1.91	1.51	NA	NA	XXX
74235	26	A	Remove esophagus obstruction	1.19	0.43	0.40	0.43	0.40	0.05	1.67	1.64	1.67	1.64	XXX
74240		A	X-ray exam, upper gi tract	0.69	2.40	1.87	NA	NA	0.11	3.20	2.67	NA	NA	XXX
74240	26	A	X-ray exam, upper gi tract	0.69	0.24	0.23	0.24	0.23	0.03	0.96	0.95	0.96	0.95	XXX
74240	TC	A	X-ray exam, upper gi tract	0.00	2.16	1.64	NA	NA	0.08	2.24	1.72	NA	NA	XXX
74241		A	X-ray exam, upper gi tract	0.69	2.67	1.96	NA	NA	0.11	3.47	2.76	NA	NA	XXX
74241	26	A	X-ray exam, upper gi tract	0.69	0.23	0.23	0.23	0.23	0.03	0.95	0.95	0.95	0.95	XXX
74241	TC	A	X-ray exam, upper gi tract	0.00	2.43	1.73	NA	NA	0.08	2.51	1.81	NA	NA	XXX
74245		A	X-ray exam, upper gi tract	0.91	4.13	3.05	NA	NA	0.17	5.21	4.13	NA	NA	XXX
74245	26	A	X-ray exam, upper gi tract	0.91	0.32	0.31	0.32	0.31	0.04	1.27	1.26	1.27	1.26	XXX
74245	TC	A	X-ray exam, upper gi tract	0.00	3.81	2.75	NA	NA	0.13	3.94	2.88	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
74246		A	Contrst x-ray uppr gi tract	0.69	2.91	2.13	NA	NA	0.13	3.73	2.95	NA	NA	XXX
74246	26	A	Contrst x-ray uppr gi tract	0.69	0.24	0.23	0.24	0.23	0.03	0.96	0.95	0.96	0.95	XXX
74246	TC	A	Contrst x-ray uppr gi tract	0.00	2.67	1.90	NA	NA	0.10	2.77	2.00	NA	NA	XXX
74247		A	Contrst x-ray uppr gi tract	0.69	3.36	2.27	NA	NA	0.14	4.19	3.10	NA	NA	XXX
74247	26	A	Contrst x-ray uppr gi tract	0.69	0.24	0.23	0.24	0.23	0.03	0.96	0.95	0.96	0.95	XXX
74247	TC	A	Contrst x-ray uppr gi tract	0.00	3.12	2.04	NA	NA	0.11	3.23	2.15	NA	NA	XXX
74249		A	Contrst x-ray uppr gi tract	0.91	4.53	3.29	NA	NA	0.18	5.62	4.38	NA	NA	XXX
74249	26	A	Contrst x-ray uppr gi tract	0.91	0.32	0.31	0.32	0.31	0.04	1.27	1.26	1.27	1.26	XXX
74249	TC	A	Contrst x-ray uppr gi tract	0.00	4.22	2.99	NA	NA	0.14	4.36	3.13	NA	NA	XXX
74250		A	X-ray exam of small bowel	0.47	2.59	1.74	NA	NA	0.09	3.15	2.30	NA	NA	XXX
74250	26	A	X-ray exam of small bowel	0.47	0.16	0.15	0.16	0.15	0.02	0.65	0.64	0.65	0.64	XXX
74250	TC	A	X-ray exam of small bowel	0.00	2.43	1.59	NA	NA	0.07	2.50	1.66	NA	NA	XXX
74251		A	X-ray exam of small bowel	0.69	10.48	3.78	NA	NA	0.10	11.27	4.57	NA	NA	XXX
74251	26	A	X-ray exam of small bowel	0.69	0.24	0.23	0.24	0.23	0.03	0.96	0.95	0.96	0.95	XXX
74251	TC	A	X-ray exam of small bowel	0.00	10.24	3.54	NA	NA	0.07	10.31	3.61	NA	NA	XXX
74260		A	X-ray exam of small bowel	0.50	8.69	3.41	NA	NA	0.10	9.29	4.01	NA	NA	XXX
74260	26	A	X-ray exam of small bowel	0.50	0.17	0.16	0.17	0.16	0.02	0.69	0.68	0.69	0.68	XXX
74260	TC	A	X-ray exam of small bowel	0.00	8.52	3.25	NA	NA	0.08	8.60	3.33	NA	NA	XXX
74270		A	Contrast x-ray exam of colon	0.69	3.73	2.38	NA	NA	0.14	4.56	3.21	NA	NA	XXX
74270	26	A	Contrast x-ray exam of colon	0.69	0.24	0.23	0.24	0.23	0.03	0.96	0.95	0.96	0.95	XXX
74270	TC	A	Contrast x-ray exam of colon	0.00	3.49	2.15	NA	NA	0.11	3.60	2.26	NA	NA	XXX
74280		A	Contrast x-ray exam of colon	0.99	5.17	3.21	NA	NA	0.17	6.33	4.37	NA	NA	XXX
74280	26	A	Contrast x-ray exam of colon	0.99	0.34	0.33	0.34	0.33	0.04	1.37	1.36	1.37	1.36	XXX
74280	TC	A	Contrast x-ray exam of colon	0.00	4.83	2.89	NA	NA	0.13	4.96	3.02	NA	NA	XXX
74283		A	Contrast x-ray exam of colon	2.02	3.60	3.32	NA	NA	0.23	5.85	5.57	NA	NA	XXX
74283	26	A	Contrast x-ray exam of colon	2.02	0.68	0.67	0.68	0.67	0.09	2.79	2.78	2.79	2.78	XXX
74283	TC	A	Contrast x-ray exam of colon	0.00	2.92	2.66	NA	NA	0.14	3.06	2.80	NA	NA	XXX
74290		A	Contrast x-ray, gallbladder	0.32	1.62	1.03	NA	NA	0.06	2.00	1.41	NA	NA	XXX
74290	26	A	Contrast x-ray, gallbladder	0.32	0.11	0.10	0.11	0.10	0.01	0.44	0.43	0.44	0.43	XXX
74290	TC	A	Contrast x-ray, gallbladder	0.00	1.52	0.93	NA	NA	0.05	1.57	0.98	NA	NA	XXX
74291		A	Contrast x-rays, gallbladder	0.20	1.65	0.78	NA	NA	0.03	1.88	1.01	NA	NA	XXX
74291	26	A	Contrast x-rays, gallbladder	0.20	0.07	0.07	0.07	0.07	0.01	0.28	0.28	0.28	0.28	XXX
74291	TC	A	Contrast x-rays, gallbladder	0.00	1.59	0.71	NA	NA	0.02	1.61	0.73	NA	NA	XXX
74300	26	A	X-ray bile ducts/pancreas	0.36	0.12	0.12	0.12	0.12	0.02	0.50	0.50	0.50	0.50	XXX
74301	26	A	X-rays at surgery add-on	0.21	0.07	0.07	0.07	0.07	0.01	0.29	0.29	0.29	0.29	ZZZ
74305		A	X-ray bile ducts/pancreas	0.42	0.15	0.73	NA	NA	0.07	0.64	1.22	NA	NA	XXX
74305	26	A	X-ray bile ducts/pancreas	0.42	0.15	0.14	0.15	0.14	0.02	0.59	0.58	0.59	0.58	XXX
74305	TC	A	X-ray bile ducts/pancreas	0.00	0.00	0.59	NA	NA	0.05	0.05	0.64	NA	NA	XXX
74320		A	Contrast x-ray of bile ducts	0.54	2.23	3.06	NA	NA	0.19	2.96	3.79	NA	NA	XXX
74320	26	A	Contrast x-ray of bile ducts	0.54	0.19	0.18	0.19	0.18	0.02	0.75	0.74	0.75	0.74	XXX
74320	TC	A	Contrast x-ray of bile ducts	0.00	2.04	2.88	NA	NA	0.17	2.21	3.05	NA	NA	XXX
74327		A	X-ray bile stone removal	0.70	3.14	2.29	NA	NA	0.14	3.98	3.13	NA	NA	XXX
74327	26	A	X-ray bile stone removal	0.70	0.25	0.24	0.25	0.24	0.03	0.98	0.97	0.98	0.97	XXX
74327	TC	A	X-ray bile stone removal	0.00	2.89	2.05	NA	NA	0.11	3.00	2.16	NA	NA	XXX
74328		A	X-ray bile duct endoscopy	0.70	0.26	2.61	NA	NA	0.20	1.16	3.51	NA	NA	XXX
74328	26	A	X-ray bile duct endoscopy	0.70	0.26	0.24	0.26	0.24	0.03	0.99	0.97	0.99	0.97	XXX
74328	TC	A	X-ray bile duct endoscopy	0.00	0.00	2.37	NA	NA	0.17	0.17	2.54	NA	NA	XXX
74329	6	A	X-ray for pancreas endoscopy	0.70	0.26	0.24	0.26	0.24	0.03	0.99	0.97	0.99	0.97	XXX
74330		A	X-ray bile/panc endoscopy	0.90	0.33	2.67	NA	NA	0.21	1.44	3.78	NA	NA	XXX
74330	26	A	X-ray bile/panc endoscopy	0.90	0.33	0.30	0.33	0.30	0.04	1.27	1.24	1.27	1.24	XXX
74330	TC	A	X-ray bile/panc endoscopy	0.00	0.00	2.37	NA	NA	0.17	0.17	2.54	NA	NA	XXX
74340		A	X-ray guide for GI tube	0.54	0.19	2.16	NA	NA	0.16	0.89	2.86	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
74340	26	A	X-ray guide for GI tube	0.54	0.19	0.18	0.19	0.18	0.02	0.75	0.74	0.75	0.74	XXX
74340	TC	A	X-ray guide for GI tube	0.00	0.00	1.97	NA	NA	0.14	0.14	2.11	NA	NA	XXX
74350		A	X-ray guide, stomach tube	0.76	2.33	3.14	NA	NA	0.20	3.29	4.10	NA	NA	XXX
74350	26	A	X-ray guide, stomach tube	0.76	0.28	0.26	0.28	0.26	0.03	1.07	1.05	1.07	1.05	XXX
74350	TC	A	X-ray guide, stomach tube	0.00	2.06	2.89	NA	NA	0.17	2.23	3.06	NA	NA	XXX
74355		A	X-ray guide, intestinal tube	0.76	0.27	2.23	NA	NA	0.17	1.20	3.16	NA	NA	XXX
74355	26	A	X-ray guide, intestinal tube	0.76	0.27	0.26	0.27	0.26	0.03	1.06	1.05	1.06	1.05	XXX
74355	TC	A	X-ray guide, intestinal tube	0.00	0.00	1.97	NA	NA	0.14	0.14	2.11	NA	NA	XXX
74360		A	X-ray guide, GI dilation	0.54	0.25	2.58	NA	NA	0.19	0.98	3.31	NA	NA	XXX
74360	26	A	X-ray guide, GI dilation	0.54	0.25	0.21	0.25	0.21	0.02	0.81	0.77	0.81	0.77	XXX
74360	TC	A	X-ray guide, GI dilation	0.00	0.00	2.37	NA	NA	0.17	0.17	2.54	NA	NA	XXX
74363	26	A	X-ray, bile duct dilation	0.88	0.32	0.30	0.32	0.30	0.04	1.24	1.22	1.24	1.22	XXX
74400		A	Contrst x-ray, urinary tract	0.49	2.72	2.06	NA	NA	0.13	3.34	2.68	NA	NA	XXX
74400	26	A	Contrst x-ray, urinary tract	0.49	0.17	0.16	0.17	0.16	0.02	0.68	0.67	0.68	0.67	XXX
74400	TC	A	Contrst x-ray, urinary tract	0.00	2.55	1.90	NA	NA	0.11	2.66	2.01	NA	NA	XXX
74410		A	Contrst x-ray, urinary tract	0.49	2.83	2.30	NA	NA	0.13	3.45	2.92	NA	NA	XXX
74410	26	A	Contrst x-ray, urinary tract	0.49	0.18	0.17	0.18	0.17	0.02	0.69	0.68	0.69	0.68	XXX
74410	TC	A	Contrst x-ray, urinary tract	0.00	2.65	2.13	NA	NA	0.11	2.76	2.24	NA	NA	XXX
74415		A	Contrst x-ray, urinary tract	0.49	3.43	2.58	NA	NA	0.14	4.06	3.21	NA	NA	XXX
74415	26	A	Contrst x-ray, urinary tract	0.49	0.17	0.16	0.17	0.16	0.02	0.68	0.67	0.68	0.67	XXX
74415	TC	A	Contrst x-ray, urinary tract	0.00	3.25	2.41	NA	NA	0.12	3.37	2.53	NA	NA	XXX
74420		A	Contrst x-ray, urinary tract	0.36	0.13	2.10	NA	NA	0.16	0.65	2.62	NA	NA	XXX
74420	26	A	Contrst x-ray, urinary tract	0.36	0.13	0.12	0.13	0.12	0.02	0.51	0.50	0.51	0.50	XXX
74420	TC	A	Contrst x-ray, urinary tract	0.00	0.00	1.97	NA	NA	0.14	0.14	2.11	NA	NA	XXX
74425		A	Contrst x-ray, urinary tract	0.36	0.13	1.11	NA	NA	0.09	0.58	1.56	NA	NA	XXX
74425	26	A	Contrst x-ray, urinary tract	0.36	0.13	0.12	0.13	0.12	0.02	0.51	0.50	0.51	0.50	XXX
74425	TC	A	Contrst x-ray, urinary tract	0.00	0.00	0.98	NA	NA	0.07	0.07	1.05	NA	NA	XXX
74430		A	Contrast x-ray, bladder	0.32	2.04	1.37	NA	NA	0.08	2.44	1.77	NA	NA	XXX
74430	26	A	Contrast x-ray, bladder	0.32	0.12	0.11	0.12	0.11	0.02	0.46	0.45	0.46	0.45	XXX
74430	TC	A	Contrast x-ray, bladder	0.00	1.93	1.27	NA	NA	0.06	1.99	1.33	NA	NA	XXX
74440		A	X-ray, male genital tract	0.38	2.26	1.50	NA	NA	0.08	2.72	1.96	NA	NA	XXX
74440	26	A	X-ray, male genital tract	0.38	0.15	0.13	0.15	0.13	0.02	0.55	0.53	0.55	0.53	XXX
74440	TC	A	X-ray, male genital tract	0.00	2.11	1.38	NA	NA	0.06	2.17	1.44	NA	NA	XXX
74445		A	X-ray exam of penis	1.14	0.46	1.24	NA	NA	0.13	1.73	2.51	NA	NA	XXX
74445	26	A	X-ray exam of penis	1.14	0.46	0.39	0.46	0.39	0.07	1.67	1.60	1.67	1.60	XXX
74445	TC	A	X-ray exam of penis	0.00	0.00	0.85	NA	NA	0.06	0.06	0.91	NA	NA	XXX
74450		A	X-ray, urethra/bladder	0.33	0.12	1.21	NA	NA	0.10	0.55	1.64	NA	NA	XXX
74450	26	A	X-ray, urethra/bladder	0.33	0.12	0.11	0.12	0.11	0.02	0.47	0.46	0.47	0.46	XXX
74450	TC	A	X-ray, urethra/bladder	0.00	0.00	1.10	NA	NA	0.08	0.08	1.18	NA	NA	XXX
74455		A	X-ray, urethra/bladder	0.33	2.26	1.83	NA	NA	0.12	2.71	2.28	NA	NA	XXX
74455	26	A	X-ray, urethra/bladder	0.33	0.13	0.12	0.13	0.12	0.02	0.48	0.47	0.48	0.47	XXX
74455	TC	A	X-ray, urethra/bladder	0.00	2.13	1.72	NA	NA	0.10	2.23	1.82	NA	NA	XXX
74470		A	X-ray exam of kidney lesion	0.54	0.17	1.12	NA	NA	0.09	0.80	1.75	NA	NA	XXX
74470	26	A	X-ray exam of kidney lesion	0.54	0.17	0.18	0.17	0.18	0.02	0.73	0.74	0.73	0.74	XXX
74470	TC	A	X-ray exam of kidney lesion	0.00	0.00	0.94	NA	NA	0.07	0.07	1.01	NA	NA	XXX
74475		A	X-ray control, cath insert	0.54	2.22	3.75	NA	NA	0.24	3.00	4.53	NA	NA	XXX
74475	26	A	X-ray control, cath insert	0.54	0.19	0.18	0.19	0.18	0.02	0.75	0.74	0.75	0.74	XXX
74475	TC	A	X-ray control, cath insert	0.00	2.03	3.57	NA	NA	0.22	2.25	3.79	NA	NA	XXX
74480		A	X-ray control, cath insert	0.54	2.23	3.75	NA	NA	0.24	3.01	4.53	NA	NA	XXX
74480	26	A	X-ray control, cath insert	0.54	0.20	0.19	0.20	19	0.02	0.76	0.75	0.76	0.75	XXX
74480	TC	A	X-ray control, cath insert	0.00	2.04	3.57	NA	NA	0.22	2.26	3.79	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
74485		A	X-ray guide, GU dilation	0.54	2.38	3.09	NA	NA	0.20	3.12	3.83	NA	NA	XXX
74485	26	A	X-ray guide, GU dilation	0.54	0.21	0.18	0.21	0.18	0.03	0.78	0.75	0.78	0.75	XXX
74485	TC	A	X-ray guide, GU dilation	0.00	2.18	2.92	NA	NA	0.17	2.35	3.09	NA	NA	XXX
74710		A	X-ray measurement of pelvis	0.34	0.67	1.04	NA	NA	0.08	1.09	1.46	NA	NA	XXX
74710	26	A	X-ray measurement of pelvis	0.34	0.12	0.11	0.12	0.11	0.02	0.48	0.47	0.48	0.47	XXX
74710	TC	A	X-ray measurement of pelvis	0.00	0.56	0.93	NA	NA	0.06	0.62	0.99	NA	NA	XXX
74740		A	X-ray, female genital tract	0.38	1.83	1.54	NA	NA	0.09	2.30	2.01	NA	NA	XXX
74740	26	A	X-ray, female genital tract	0.38	0.13	0.13	0.13	0.13	0.02	0.53	0.53	0.53	0.53	XXX
74740	TC	A	X-ray, female genital tract	0.00	1.70	1.41	NA	NA	0.07	1.77	1.48	NA	NA	XXX
74742	26	A	X-ray, fallopian tube	0.61	0.19	0.20	0.19	0.20	0.03	0.83	0.84	0.83	0.84	XXX
74775		A	X-ray exam of perineum	0.62	0.21	1.31	NA	NA	0.11	0.94	2.04	NA	NA	XXX
74775	26	A	X-ray exam of perineum	0.62	0.21	0.21	0.21	0.21	0.03	0.86	0.86	0.86	0.86	XXX
74775	TC	A	X-ray exam of perineum	0.00	0.00	1.10	NA	NA	0.08	0.08	1.18	NA	NA	XXX
75552		A	Heart mri for morph w/o dye	1.60	19.96	13.81	NA	NA	0.66	22.22	16.07	NA	NA	XXX
75552	26	A	Heart mri for morph w/o dye	1.60	0.61	0.55	0.61	0.55	0.07	2.28	2.22	2.28	2.22	XXX
75552	TC	A	Heart mri for morph w/o dye	0.00	19.35	13.26	NA	NA	0.59	19.94	13.85	NA	NA	XXX
75553		A	Heart mri for morph w/dye	2.00	24.80	15.11	NA	NA	0.66	27.46	17.77	NA	NA	XXX
75553	26	A	Heart mri for morph w/dye	2.00	0.98	0.73	0.98	0.73	0.07	3.05	2.80	3.05	2.80	XXX
75553	TC	A	Heart mri for morph w/dye	0.00	23.82	14.38	NA	NA	0.59	24.41	14.97	NA	NA	XXX
75554		A	Cardiac MRI/function	1.83	27.96	15.89	NA	NA	0.66	30.45	18.38	NA	NA	XXX
75554	26	A	Cardiac MRI/function	1.83	0.84	0.69	0.84	0.69	0.07	2.74	2.59	2.74	2.59	XXX
75554	TC	A	Cardiac MRI/function	0.00	27.12	15.20	NA	NA	0.59	27.71	15.79	NA	NA	XXX
75555		A	Cardiac MRI/limited study	1.74	28.19	15.95	NA	NA	0.66	30.59	18.35	NA	NA	XXX
75555	26	A	Cardiac MRI/limited study	1.74	0.87	0.70	0.87	0.70	0.07	2.68	2.51	2.68	2.51	XXX
75555	TC	A	Cardiac MRI/limited study	0.00	27.32	15.25	NA	NA	0.59	27.91	15.84	NA	NA	XXX
75600		A	Contrast x-ray exam of aorta	0.49	6.59	11.27	NA	NA	0.67	7.75	12.43	NA	NA	XXX
75600	26	A	Contrast x-ray exam of aorta	0.49	0.26	0.21	0.26	0.21	0.02	0.77	0.72	0.77	0.72	XXX
75600	TC	A	Contrast x-ray exam of aorta	0.00	6.33	11.06	NA	NA	0.65	6.98	11.71	NA	NA	XXX
75605		A	Contrast x-ray exam of aorta	1.14	3.70	10.71	NA	NA	0.70	5.54	12.55	NA	NA	XXX
75605	26	A	Contrast x-ray exam of aorta	1.14	0.52	0.43	0.52	0.43	0.05	1.71	1.62	1.71	1.62	XXX
75605	TC	A	Contrast x-ray exam of aorta	0.00	3.18	10.28	NA	NA	0.65	3.83	10.93	NA	NA	XXX
75625		A	Contrast x-ray exam of aorta	1.14	3.49	10.64	NA	NA	0.71	5.34	12.49	NA	NA	XXX
75625	26	A	Contrast x-ray exam of aorta	1.14	0.44	0.40	0.44	0.40	0.06	1.64	1.60	1.64	1.60	XXX
75625	TC	A	Contrast x-ray exam of aorta	0.00	3.05	10.24	NA	NA	0.65	3.70	10.89	NA	NA	XXX
75630		A	X-ray aorta, leg arteries	1.79	3.89	11.31	NA	NA	0.80	6.48	13.90	NA	NA	XXX
75630	26	A	X-ray aorta, leg arteries	1.79	0.74	0.64	0.74	0.64	0.11	2.64	2.54	2.64	2.54	XXX
75630	TC	A	X-ray aorta, leg arteries	0.00	3.14	10.66	NA	NA	0.69	3.83	11.35	NA	NA	XXX
75635		A	Ct angio abdominal arteries	2.40	13.37	15.91	NA	NA	0.50	16.27	18.81	NA	NA	XXX
75635	26	A	Ct angio abdominal arteries	2.40	0.90	0.82	0.90	0.82	0.11	3.41	3.33	3.41	3.33	XXX
75635	TC	A	Ct angio abdominal arteries	0.00	12.47	15.09	NA	NA	0.39	12.86	15.48	NA	NA	XXX
75650		A	Artery x-rays, head & neck	1.49	3.65	10.76	NA	NA	0.72	5.86	12.97	NA	NA	XXX
75650	26	A	Artery x-rays, head & neck	1.49	0.59	0.52	0.59	0.52	0.07	2.15	2.08	2.15	2.08	XXX
75650	TC	A	Artery x-rays, head & neck	0.00	3.06	10.25	NA	NA	0.65	3.71	10.90	NA	NA	XXX
75658		A	Artery x-rays, arm	1.31	3.98	10.83	NA	NA	0.72	6.01	12.86	NA	NA	XXX
75658	26	A	Artery x-rays, arm	1.31	0.51	0.48	0.51	0.48	0.07	1.89	1.86	1.89	1.86	XXX
75658	TC	A	Artery x-rays, arm	0.00	3.47	10.35	NA	NA	0.65	4.12	11.00	NA	NA	XXX
75660		A	Artery x-rays, head & neck	1.31	4.07	10.83	NA	NA	0.71	6.09	12.85	NA	NA	XXX
75660	26	A	Artery x-rays, head & neck	1.31	0.52	0.46	0.52	0.46	0.06	1.89	1.83	1.89	1.83	XXX
75660	TC	A	Artery x-rays, head & neck	0.00	3.55	10.37	NA	NA	0.65	4.20	11.02	NA	NA	XXX
75662		A	Artery x-rays, head & neck	1.66	5.24	11.23	NA	NA	0.71	7.61	13.60	NA	NA	XXX
75662	26	A	Artery x-rays, head & neck	1.66	0.75	0.63	0.75	0.63	0.06	2.47	2.35	2.47	2.35	XXX
75662	TC	A	Artery x-rays, head & neck	0.00	4.49	10.60	NA	NA	0.65	5.14	11.25	NA	NA	XXX
75665		A	Artery x-rays, head & neck	1.31	4.25	10.87	NA	NA	0.74	6.30	12.92	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
75665	26	A	Artery x-rays, head & neck	1.31	0.49	0.45	0.49	0.45	0.09	1.89	1.85	1.89	1.85	XXX
75665	TC	A	Artery x-rays, head & neck	0.00	3.76	10.42	NA	NA	0.65	4.41	11.07	NA	NA	XXX
75671		A	Artery x-rays, head & neck	1.66	5.28	11.21	NA	NA	0.72	7.66	13.59	NA	NA	XXX
75671	26	A	Artery x-rays, head & neck	1.66	0.65	0.58	0.65	0.58	0.07	2.38	2.31	2.38	2.31	XXX
75671	TC	A	Artery x-rays, head & neck	0.00	4.63	10.64	NA	NA	0.65	5.28	11.29	NA	NA	XXX
75676		A	Artery x-rays, neck	1.31	4.00	10.81	NA	NA	0.72	6.03	12.84	NA	NA	XXX
75676	26	A	Artery x-rays, neck	1.31	0.49	0.45	0.49	0.45	0.07	1.87	1.83	1.87	1.83	XXX
75676	TC	A	Artery x-rays, neck	0.00	3.50	10.36	NA	NA	0.65	4.15	11.01	NA	NA	XXX
75680		A	Artery x-rays, neck	1.66	4.77	11.09	NA	NA	0.72	7.15	13.47	NA	NA	XXX
75680	26	A	Artery x-rays, neck	1.66	0.67	0.58	0.67	0.58	0.07	2.40	2.31	2.40	2.31	XXX
75680	TC	A	Artery x-rays, neck	0.00	4.09	10.50	NA	NA	0.65	4.74	11.15	NA	NA	XXX
75685		A	Artery x-rays, spine	1.31	4.04	10.81	NA	NA	0.71	6.06	12.83	NA	NA	XXX
75685	26	A	Artery x-rays, spine	1.31	0.52	0.45	0.52	0.45	0.06	1.89	1.82	1.89	1.82	XXX
75685	TC	A	Artery x-rays, spine	0.00	3.52	10.36	NA	NA	0.65	4.17	11.01	NA	NA	XXX
75705		A	Artery x-rays, spine	2.18	4.27	11.10	NA	NA	0.78	7.23	14.06	NA	NA	XXX
75705	26	A	Artery x-rays, spine	2.18	0.79	0.75	0.79	0.75	0.13	3.10	3.06	3.10	3.06	XXX
75705	TC	A	Artery x-rays, spine	0.00	3.49	10.35	NA	NA	0.65	4.14	11.00	NA	NA	XXX
75710		A	Artery x-rays, arm/leg	1.14	4.10	10.80	NA	NA	0.72	5.96	12.66	NA	NA	XXX
75710	26	A	Artery x-rays, arm/leg	1.14	0.44	0.40	0.44	0.40	0.07	1.65	1.61	1.65	1.61	XXX
75710	TC	A	Artery x-rays, arm/leg	0.00	3.66	10.40	NA	NA	0.65	4.31	11.05	NA	NA	XXX
75716		A	Artery x-rays, arms/legs	1.31	5.10	11.08	NA	NA	0.72	7.13	13.11	NA	NA	XXX
75716	26	A	Artery x-rays, arms/legs	1.31	0.52	0.45	0.52	0.45	0.07	1.90	1.83	1.90	1.83	XXX
75716	TC	A	Artery x-rays, arms/legs	0.00	4.58	10.63	NA	NA	0.65	5.23	11.28	NA	NA	XXX
75722		A	Artery x-rays, kidney	1.14	4.00	10.78	NA	NA	0.70	5.84	12.62	NA	NA	XXX
75722	26	A	Artery x-rays, kidney	1.14	0.49	0.42	0.49	0.42	0.05	1.68	1.61	1.68	1.61	XXX
75722	TC	A	Artery x-rays, kidney	0.00	3.51	10.36	NA	NA	0.65	4.16	11.01	NA	NA	XXX
75724		A	Artery x-rays, kidneys	1.49	5.30	11.23	NA	NA	0.70	7.49	13.42	NA	NA	XXX
75724	26	A	Artery x-rays, kidneys	1.49	0.77	0.61	0.77	0.61	0.05	2.31	2.15	2.31	2.15	XXX
75724	TC	A	Artery x-rays, kidneys	0.00	4.52	10.61	NA	NA	0.65	5.17	11.26	NA	NA	XXX
75726		A	Artery x-rays, abdomen	1.14	3.92	10.74	NA	NA	0.70	5.76	12.58	NA	NA	XXX
75726	26	A	Artery x-rays, abdomen	1.14	0.42	0.38	0.42	0.38	0.05	1.61	1.57	1.61	1.57	XXX
75726	TC	A	Artery x-rays, abdomen	0.00	3.50	10.36	NA	NA	0.65	4.15	11.01	NA	NA	XXX
75731		A	Artery x-rays, adrenal gland	1.14	4.05	10.77	NA	NA	0.71	5.90	12.62	NA	NA	XXX
75731	26	A	Artery x-rays, adrenal gland	1.14	0.45	0.39	0.45	0.39	0.06	1.65	1.59	1.65	1.59	XXX
75731	TC	A	Artery x-rays, adrenal gland	0.00	3.60	10.38	NA	NA	0.65	4.25	11.03	NA	NA	XXX
75733		A	Artery x-rays, adrenals	1.31	5.42	11.17	NA	NA	0.71	7.44	13.19	NA	NA	XXX
75733	26	A	Artery x-rays, adrenals	1.31	0.62	0.49	0.62	0.49	0.06	1.99	1.86	1.99	1.86	XXX
75733	TC	A	Artery x-rays, adrenals	0.00	4.80	10.68	NA	NA	0.65	5.45	11.33	NA	NA	XXX
75736		A	Artery x-rays, pelvis	1.14	4.02	10.77	NA	NA	0.71	5.87	12.62	NA	NA	XXX
75736	26	A	Artery x-rays, pelvis	1.14	0.44	0.40	0.44	0.40	0.06	1.64	1.60	1.64	1.60	XXX
75736	TC	A	Artery x-rays, pelvis	0.00	3.58	10.38	NA	NA	0.65	4.23	11.03	NA	NA	XXX
75741		A	Artery x-rays, lung	1.31	3.29	10.63	NA	NA	0.71	5.31	12.65	NA	NA	XXX
75741	26	A	Artery x-rays, lung	1.31	0.49	0.45	0.49	0.45	0.06	1.86	1.82	1.86	1.82	XXX
75741	TC	A	Artery x-rays, lung	0.00	2.81	10.18	NA	NA	0.65	3.46	10.83	NA	NA	XXX
75743		A	Artery x-rays, lungs	1.66	3.70	10.81	NA	NA	0.72	6.08	13.19	NA	NA	XXX
75743	26	A	Artery x-rays, lungs	1.66	0.62	0.56	0.62	0.56	0.07	2.35	2.29	2.35	2.29	XXX
75743	TC	A	Artery x-rays, lungs	0.00	3.08	10.25	NA	NA	0.65	3.73	10.90	NA	NA	XXX
75746		A	Artery x-rays, lung	1.14	3.60	10.67	NA	NA	0.70	5.44	12.51	NA	NA	XXX
75746	26	A	Artery x-rays, lung	1.14	0.39	0.38	0.39	0.38	0.05	1.58	1.57	1.58	1.57	XXX
75746	TC	A	Artery x-rays, lung	0.00	3.21	10.28	NA	NA	0.65	3.86	10.93	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
75756		A	Artery x-rays, chest	1.14	4.51	10.95	NA	NA	0.69	6.34	12.78	NA	NA	XXX
75756	26	A	Artery x-rays, chest	1.14	0.62	0.49	0.62	0.49	0.04	1.80	1.67	1.80	1.67	XXX
75756	TC	A	Artery x-rays, chest	0.00	3.90	10.46	NA	NA	0.65	4.55	11.11	NA	NA	XXX
75774		A	Artery x-ray, each vessel	0.36	2.61	10.22	NA	NA	0.67	3.64	11.25	NA	NA	ZZZ
75774	26	A	Artery x-ray, each vessel	0.36	0.14	0.13	0.14	0.13	0.02	0.52	0.51	0.52	0.51	ZZZ
75774	TC	A	Artery x-ray, each vessel	0.00	2.47	10.10	NA	NA	0.65	3.12	10.75	NA	NA	ZZZ
75790		A	Visualize A-V shunt	1.84	3.24	2.27	NA	NA	0.17	5.25	4.28	NA	NA	XXX
75790	26	A	Visualize A-V shunt	1.84	0.61	0.60	0.61	0.60	0.09	2.54	2.53	2.54	2.53	XXX
75790	TC	A	Visualize A–V shunt	0.00	2.63	1.67	NA	NA	0.08	2.71	1.75	NA	NA	XXX
75801		A	Lymph vessel x-ray, arm/leg	0.81	0.22	4.33	NA	NA	0.37	1.40	5.51	NA	NA	XXX
75801	26	A	Lymph vessel x-ray, arm/leg	0.81	0.22	0.26	0.22	0.26	0.08	1.11	1.15	1.11	1.15	XXX
75801	TC	A	Lymph vessel x-ray, arm/leg	0.00	0.00	4.07	NA	NA	0.29	0.29	4.36	NA	NA	XXX
75803		A	Lymph vessel x-ray,arms/legs	1.17	0.38	4.45	NA	NA	0.34	1.89	5.96	NA	NA	XXX
75803	26	A	Lymph vessel x-ray,arms/legs	1.17	0.38	0.38	0.38	0.38	0.05	1.60	1.60	1.60	1.60	XXX
75803	TC	A	Lymph vessel x-ray,arms/legs	0.00	0.00	4.07	NA	NA	0.29	0.29	4.36	NA	NA	XXX
75805		A	Lymph vessel x-ray, trunk	0.81	0.23	4.85	NA	NA	0.38	1.42	6.04	NA	NA	XXX
75805	26	A	Lymph vessel x-ray, trunk	0.81	0.23	0.26	0.23	0.26	0.05	1.09	1.12	1.09	1.12	XXX
75805	TC	A	Lymph vessel x-ray, trunk	0.00	0.00	4.59	NA	NA	0.33	0.33	4.92	NA	NA	XXX
75807	26	A	Lymph vessel x-ray, trunk	1.17	0.41	0.39	0.41	0.39	0.05	1.63	1.61	1.63	1.61	XXX
75809		A	Nonvascular shunt, x-ray	0.47	2.28	1.27	NA	NA	0.07	2.82	1.81	NA	NA	XXX
75809	26	A	Nonvascular shunt, x-ray	0.47	0.16	0.15	0.16	0.15	0.02	0.65	0.64	0.65	0.64	XXX
75809	TC	A	Nonvascular shunt, x-ray	0.00	2.12	1.12	NA	NA	0.05	2.17	1.17	NA	NA	XXX
75810		A	Vein x-ray, spleen/liver	1.14	0.43	9.87	NA	NA	0.70	2.27	11.71	NA	NA	XXX
75810	26	A	Vein x-ray, spleen/liver	1.14	0.43	0.39	0.43	0.39	0.05	1.62	1.58	1.62	1.58	XXX
75810	TC	A	Vein x-ray, spleen/liver	0.00	0.00	9.48	NA	NA	0.65	0.65	10.13	NA	NA	XXX
75820		A	Vein x-ray, arm/leg	0.70	3.11	1.66	NA	NA	0.09	3.90	2.45	NA	NA	XXX
75820	26	A	Vein x-ray, arm/leg	0.70	0.29	0.25	0.29	0.25	0.03	1.02	0.98	1.02	0.98	XXX
75820	TC	A	Vein x-ray, arm/leg	0.00	2.82	1.42	NA	NA	0.06	2.88	1.48	NA	NA	XXX
75822		A	Vein x-ray, arms/legs	1.06	3.32	2.20	NA	NA	0.13	4.51	3.39	NA	NA	XXX
75822	26	A	Vein x-ray, arms/legs	1.06	0.38	0.36	0.38	0.36	0.05	1.49	1.47	1.49	1.47	XXX
75822	TC	A	Vein x-ray, arms/legs	0.00	2.95	1.85	NA	NA	0.08	3.03	1.93	NA	NA	XXX
75825		A	Vein x-ray, trunk	1.14	3.07	10.53	NA	NA	0.72	4.93	12.39	NA	NA	XXX
75825	26	A	Vein x-ray, trunk	1.14	0.39	0.38	0.39	0.38	0.07	1.60	1.59	1.60	1.59	XXX
75825	TC	A	Vein x-ray, trunk	0.00	2.67	10.15	NA	NA	0.65	3.32	10.80	NA	NA	XXX
75827		A	Vein x-ray, chest	1.14	3.10	10.53	NA	NA	0.70	4.94	12.37	NA	NA	XXX
75827	26	A	Vein x-ray, chest	1.14	0.39	0.38	0.39	0.38	0.05	1.58	1.57	1.58	1.57	XXX
75827	TC	A	Vein x-ray, chest	0.00	2.71	10.16	NA	NA	0.65	3.36	10.81	NA	NA	XXX
75831		A	Vein x-ray, kidney	1.14	3.19	10.56	NA	NA	0.71	5.04	12.41	NA	NA	XXX
75831	26	A	Vein x-ray, kidney	1.14	0.39	0.38	0.39	0.38	0.06	1.59	1.58	1.59	1.58	XXX
75831	TC	A	Vein x-ray, kidney	0.00	2.79	10.18	NA	NA	0.65	3.44	10.83	NA	NA	XXX
75833		A	Vein x-ray, kidneys	1.49	3.86	10.81	NA	NA	0.74	6.09	13.04	NA	NA	XXX
75833	26	A	Vein x-ray, kidneys	1.49	0.51	0.50	0.51	0.50	0.09	2.09	2.08	2.09	2.08	XXX
75833	TC	A	Vein x-ray, kidneys	0.00	3.35	10.32	NA	NA	0.65	4.00	10.97	NA	NA	XXX
75840		A	Vein x-ray, adrenal gland	1.14	3.41	10.62	NA	NA	0.72	5.27	12.48	NA	NA	XXX
75840	26	A	Vein x-ray, adrenal gland	1.14	0.48	0.41	0.48	0.41	0.07	1.69	1.62	1.69	1.62	XXX
75840	TC	A	Vein x-ray, adrenal gland	0.00	2.93	10.21	NA	NA	0.65	3.58	10.86	NA	NA	XXX
75842		A	Vein x-ray, adrenal glands	1.49	3.87	10.81	NA	NA	0.72	6.08	13.02	NA	NA	XXX
75842	26	A	Vein x-ray, adrenal glands	1.49	0.54	0.50	0.54	0.50	0.07	2.10	2.06	2.10	2.06	XXX
75842	TC	A	Vein x-ray, adrenal glands	0.00	3.33	10.31	NA	NA	0.65	3.98	10.96	NA	NA	XXX
75860		A	Vein x-ray, neck	1.14	3.55	10.66	NA	NA	0.69	5.38	12.49	NA	NA	XXX
75860	26	A	Vein x-ray, neck	1.14	0.52	0.42	0.52	0.42	0.04	1.70	1.60	1.70	1.60	XXX
75860	TC	A	Vein x-ray, neck	0.00	3.03	10.24	NA	NA	0.65	3.68	10.89	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
75870		A	Vein x-ray, skull	1.14	3.35	10.61	NA	NA	0.70	5.19	12.45	NA	NA	XXX
75870	26	A	Vein x-ray, skull	1.14	0.42	0.40	0.42	0.40	0.05	1.61	1.59	1.61	1.59	XXX
75870	TC	A	Vein x-ray, skull	0.00	2.93	10.21	NA	NA	0.65	3.58	10.86	NA	NA	XXX
75872		A	Vein x-ray, skull	1.14	3.89	10.73	NA	NA	0.79	5.82	12.66	NA	NA	XXX
75872	26	A	Vein x-ray, skull	1.14	0.42	0.38	0.42	0.38	0.14	1.70	1.66	1.70	1.66	XXX
75872	TC	A	Vein x-ray, skull	0.00	3.47	10.35	NA	NA	0.65	4.12	11.00	NA	NA	XXX
75880		A	Vein x-ray, eye socket	0.70	3.07	1.65	NA	NA	0.09	3.86	2.44	NA	NA	XXX
75880	26	A	Vein x-ray, eye socket	0.70	0.24	0.23	0.24	0.23	0.03	0.97	0.96	0.97	0.96	XXX
75880	TC	A	Vein x-ray, eye socket	0.00	2.83	1.42	NA	NA	0.06	2.89	1.48	NA	NA	XXX
75885		A	Vein x-ray, liver	1.44	3.34	10.67	NA	NA	0.71	5.49	12.82	NA	NA	XXX
75885	26	A	Vein x-ray, liver	1.44	0.52	0.48	0.52	0.48	0.06	2.02	1.98	2.02	1.98	XXX
75885	TC	A	Vein x-ray, liver	0.00	2.82	10.19	NA	NA	0.65	3.47	10.84	NA	NA	XXX
75887		A	Vein x-ray, liver	1.44	3.48	10.70	NA	NA	0.71	5.63	12.85	NA	NA	XXX
75887	26	A	Vein x-ray, liver	1.44	0.55	0.49	0.55	0.49	0.06	2.05	1.99	2.05	1.99	XXX
75887	TC	A	Vein x-ray, liver	0.00	2.94	10.22	NA	NA	0.65	3.59	10.87	NA	NA	XXX
75889		A	Vein x-ray, liver	1.14	3.24	10.57	NA	NA	0.70	5.08	12.41	NA	NA	XXX
75889	26	A	Vein x-ray, liver	1.14	0.42	0.38	0.42	0.38	0.05	1.61	1.57	1.61	1.57	XXX
75889	TC	A	Vein x-ray, liver	0.00	2.82	10.19	NA	NA	0.65	3.47	10.84	NA	NA	XXX
75891		A	Vein x-ray, liver	1.14	3.21	10.56	NA	NA	0.70	5.05	12.40	NA	NA	XXX
75891	26	A	Vein x-ray, liver	1.14	0.41	0.38	0.41	0.38	0.05	1.60	1.57	1.60	1.57	XXX
75891	TC	A	Vein x-ray, liver	0.00	2.80	10.18	NA	NA	0.65	3.45	10.83	NA	NA	XXX
75893		A	Venous sampling by catheter	0.54	2.99	10.36	NA	NA	0.67	4.20	11.57	NA	NA	XXX
75893	26	A	Venous sampling by catheter	0.54	0.19	0.18	0.19	0.18	0.02	0.75	0.74	0.75	0.74	XXX
75893	TC	A	Venous sampling by catheter	0.00	2.80	10.18	NA	NA	0.65	3.45	10.83	NA	NA	XXX
75894		A	X-rays, transcath therapy	1.31	0.46	18.59	NA	NA	1.35	3.12	21.25	NA	NA	XXX
75894	26	A	X-rays, transcath therapy	1.31	0.46	0.44	0.46	0.44	0.08	1.85	1.83	1.85	1.83	XXX
75894	TC	A	X-rays, transcath therapy	0.00	0.00	18.15	NA	NA	1.27	1.27	19.42	NA	NA	XXX
75896		A	X-rays, transcath therapy	1.31	0.54	16.26	NA	NA	1.15	3.00	18.72	NA	NA	XXX
75896	26	A	X-rays, transcath therapy	1.31	0.54	0.47	0.54	0.47	0.05	1.90	1.83	1.90	1.83	XXX
75896	TC	A	X-rays, transcath therapy	0.00	0.00	15.79	NA	NA	1.10	1.10	16.89	NA	NA	XXX
75898		A	Follow-up angiography	1.65	0.65	1.36	NA	NA	0.13	2.43	3.14	NA	NA	XXX
75898	26	A	Follow-up angiography	1.65	0.65	0.58	0.65	0.58	0.07	2.37	2.30	2.37	2.30	XXX
75898	TC	A	Follow-up angiography	0.00	0.00	0.79	NA	NA	0.06	0.06	0.85	NA	NA	XXX
75900	26	A	Intravascular cath exchange	0.49	0.17	0.16	0.17	0.16	0.03	0.69	0.68	0.69	0.68	XXX
75901		A	Remove cva device obstruct	0.49	4.39	2.20	NA	NA	0.85	5.73	3.54	NA	NA	XXX
75901	26	A	Remove cva device obstruct	0.49	0.17	0.16	0.17	0.16	0.02	0.68	0.67	0.68	0.67	XXX
75901	TC	A	Remove cva device obstruct	0.00	4.22	2.04	NA	NA	0.83	5.05	2.87	NA	NA	XXX
75902		A	Remove cva lumen obstruct	0.39	1.72	1.51	NA	NA	0.85	2.96	2.75	NA	NA	XXX
75902	26	A	Remove cva lumen obstruct	0.39	0.14	0.13	0.14	0.13	0.02	0.55	0.54	0.55	0.54	XXX
75902	TC	A	Remove cva lumen obstruct	0.00	1.58	1.38	NA	NA	0.83	2.41	2.21	NA	NA	XXX
75940		A	X-ray placement, vein filter	0.54	0.18	9.66	NA	NA	0.69	1.41	10.89	NA	NA	XXX
75940	26	A	X-ray placement, vein filter	0.54	0.18	0.18	0.18	0.18	0.04	0.76	0.76	0.76	0.76	XXX
75940	TC	A	X-ray placement, vein filter	0.00	0.00	9.48	NA	NA	0.65	0.65	10.13	NA	NA	XXX
75945		A	Intravascular us	0.40	0.16	3.57	NA	NA	0.28	0.84	4.25	NA	NA	XXX
75945	26	A	Intravascular us	0.40	0.16	0.15	0.16	0.15	0.04	0.60	0.59	0.60	0.59	XXX
75945	TC	A	Intravascular us	0.00	0.00	3.43	NA	NA	0.24	0.24	3.67	NA	NA	XXX
75946	26	A	Intravascular us add-on	0.40	0.13	0.14	0.13	0.14	0.05	0.58	0.59	0.58	0.59	ZZZ
75952	26	A	Endovasc repair abdom aorta	4.49	1.38	1.46	1.38	1.46	0.43	6.30	6.38	6.30	6.38	XXX
75953	26	A	Abdom aneurysm endovas rpr	1.36	0.42	0.44	0.42	0.44	0.13	1.91	1.93	1.91	1.93	XXX
75954	26	A	Iliac aneurysm endovas rpr	2.25	0.69	0.76	0.69	0.76	0.15	3.09	3.16	3.09	3.16	XXX
75956	26	A	Xray, endovasc thor ao repr	7.00	1.57	2.43	1.57	2.43	0.69	9.26	10.12	9.26	10.12	XXX
75957	26	A	Xray, endovasc thor ao repr	6.00	1.35	2.08	1.35	2.08	0.59	7.94	8.67	7.94	8.67	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
75958	26	A	Xray, place prox ext thor ao	4.00	0.90	1.39	0.90	1.39	0.39	5.29	5.78	5.29	5.78	XXX
75959	26	A	Xray, place dist ext thor ao	3.50	0.79	1.22	0.79	1.22	0.34	4.63	5.06	4.63	5.06	XXX
75960		A	Transcath iv stent rs&i	0.82	0.33	11.50	NA	NA	0.82	1.97	13.14	NA	NA	XXX
75960	26	A	Transcath iv stent rs&i	0.82	0.33	0.29	0.33	0.29	0.05	1.20	1.16	1.20	1.16	XXX
75960	TC	A	Transcath iv stent rs&i	0.00	0.00	11.21	NA	NA	0.77	0.77	11.98	NA	NA	XXX
75961		A	Retrieval, broken catheter	4.24	4.82	10.15	NA	NA	0.73	9.79	15.12	NA	NA	XXX
75961	26	A	Retrieval, broken catheter	4.24	1.50	1.42	1.50	1.42	0.18	5.92	5.84	5.92	5.84	XXX
75961	TC	A	Retrieval, broken catheter	0.00	3.32	8.73	NA	NA	0.55	3.87	9.28	NA	NA	XXX
75962		A	Repair arterial blockage	0.54	3.63	12.89	NA	NA	0.86	5.03	14.29	NA	NA	XXX
75962	26	A	Repair arterial blockage	0.54	0.21	0.19	0.21	0.19	0.03	0.78	0.76	0.78	0.76	XXX
75962	TC	A	Repair arterial blockage	0.00	3.43	12.70	NA	NA	0.83	4.26	13.53	NA	NA	XXX
75964		A	Repair artery blockage, each	0.36	2.45	7.01	NA	NA	0.46	3.27	7.83	NA	NA	ZZZ
75964	26	A	Repair artery blockage, each	0.36	0.13	0.12	0.13	0.12	0.03	0.52	0.51	0.52	0.51	ZZZ
75964	TC	A	Repair artery blockage, each	0.00	2.31	6.89	NA	NA	0.43	2.74	7.32	NA	NA	ZZZ
75966		A	Repair arterial blockage	1.31	4.31	13.27	NA	NA	0.89	6.51	15.47	NA	NA	XXX
75966	26	A	Repair arterial blockage	1.31	0.59	0.49	0.59	0.49	0.06	1.96	1.86	1.96	1.86	XXX
75966	TC	A	Repair arterial blockage	0.00	3.72	12.77	NA	NA	0.83	4.55	13.60	NA	NA	XXX
75968		A	Repair artery blockage, each	0.36	2.50	7.03	NA	NA	0.45	3.31	7.84	NA	NA	ZZZ
75968	26	A	Repair artery blockage, each	0.36	0.16	0.14	0.16	0.14	0.02	0.54	0.52	0.54	0.52	ZZZ
75968	TC	A	Repair artery blockage, each	0.00	2.34	6.89	NA	NA	0.43	2.77	7.32	NA	NA	ZZZ
75970		A	Vascular biopsy	0.83	0.31	8.97	NA	NA	0.64	1.78	10.44	NA	NA	XXX
75970	26	A	Vascular biopsy	0.83	0.31	0.29	0.31	0.29	0.04	1.18	1.16	1.18	1.16	XXX
75970	TC	A	Vascular biopsy	0.00	0.00	8.68	NA	NA	0.60	0.60	9.28	NA	NA	XXX
75978		A	Repair venous blockage	0.54	3.39	12.83	NA	NA	0.85	4.78	14.22	NA	NA	XXX
75978	26	A	Repair venous blockage	0.54	0.18	0.18	0.18	0.18	0.02	0.74	0.74	0.74	0.74	XXX
75978	TC	A	Repair venous blockage	0.00	3.21	12.65	NA	NA	0.83	4.04	13.48	NA	NA	XXX
75980		A	Contrast xray exam bile duct	1.44	0.52	4.56	NA	NA	0.35	2.31	6.35	NA	NA	XXX
75980	26	A	Contrast xray exam bile duct	1.44	0.52	0.48	0.52	0.48	0.06	2.02	1.98	2.02	1.98	XXX
75980	TC	A	Contrast xray exam bile duct	0.00	0.00	4.07	NA	NA	0.29	0.29	4.36	NA	NA	XXX
75982	26	A	Contrast xray exam bile duct	1.44	0.52	0.48	0.52	0.48	0.06	2.02	1.98	2.02	1.98	XXX
75984		A	Xray control catheter change	0.72	2.43	2.25	NA	NA	0.14	3.29	3.11	NA	NA	XXX
75984	26	A	Xray control catheter change	0.72	0.26	0.24	0.26	0.24	0.03	1.01	0.99	1.01	0.99	XXX
75984	TC	A	Xray control catheter change	0.00	2.17	2.01	NA	NA	0.11	2.28	2.12	NA	NA	XXX
75989		A	Abscess drainage under x-ray	1.19	2.33	3.25	NA	NA	0.22	3.74	4.66	NA	NA	XXX
75989	26	A	Abscess drainage under x-ray	1.19	0.42	0.40	0.42	0.40	0.05	1.66	1.64	1.66	1.64	XXX
75989	TC	A	Abscess drainage under x-ray	0.00	1.91	2.85	NA	NA	0.17	2.08	3.02	NA	NA	XXX
75992		A	Atherectomy, x-ray exam	0.54	0.24	12.05	NA	NA	0.86	1.64	13.45	NA	NA	XXX
75992	26	A	Atherectomy, x-ray exam	0.54	0.24	0.20	0.24	0.20	0.03	0.81	0.77	0.81	0.77	XXX
75992	TC	A	Atherectomy, x-ray exam	0.00	0.00	11.84	NA	NA	0.83	0.83	12.67	NA	NA	XXX
75993	26	A	Atherectomy, x-ray exam	0.36	0.15	0.14	0.15	0.14	0.02	0.53	0.52	0.53	0.52	ZZZ
75994	26	A	Atherectomy, x-ray exam	1.31	0.63	0.50	0.63	0.50	0.07	2.01	1.88	2.01	1.88	XXX
75995	26	A	Atherectomy, x-ray exam	1.31	0.52	0.48	0.52	0.48	0.05	1.88	1.84	1.88	1.84	XXX
75996	26	A	Atherectomy, x-ray exam	0.36	0.15	0.13	0.15	0.13	0.02	0.53	0.51	0.53	0.51	ZZZ
75998		A	Fluoroguide for vein device	0.38	2.85	1.79	NA	NA	0.11	3.34	2.28	NA	NA	ZZZ
75998	26	A	Fluoroguide for vein device	0.38	0.13	0.13	0.13	0.13	0.01	0.52	0.52	0.52	0.52	ZZZ
75998	TC	A	Fluoroguide for vein device	0.00	2.72	1.66	NA	NA	0.10	2.82	1.76	NA	NA	ZZZ
76000		A	Fluoroscope examination	0.17	2.82	1.73	NA	NA	0.08	3.07	1.98	NA	NA	XXX
76000	26	A	Fluoroscope examination	0.17	0.06	0.05	0.06	0.05	0.01	0.24	0.23	0.24	0.23	XXX
76000	TC	A	Fluoroscope examination	0.00	2.76	1.67	NA	NA	0.07	2.83	1.74	NA	NA	XXX
76001		A	Fluoroscope exam, extensive	0.67	0.23	2.20	NA	NA	0.19	1.09	3.06	NA	NA	XXX
76001	26	A	Fluoroscope exam, extensive	0.67	0.23	0.22	0.23	0.22	0.05	0.95	0.94	0.95	0.94	XXX
76001	TC	A	Fluoroscope exam, extensive	0.00	0.00	1.97	NA	NA	0.14	0.14	2.11	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
76003		A	Needle localization by x-ray	0.54	1.23	1.42	NA	NA	0.09	1.86	2.05	NA	NA	XXX
76003	26	A	Needle localization by x-ray	0.54	0.15	0.17	0.15	0.17	0.02	0.71	0.73	0.71	0.73	XXX
76003	TC	A	Needle localization by x-ray	0.00	1.08	1.25	NA	NA	0.07	1.15	1.32	NA	NA	XXX
76005		A	Fluoroguide for spine inject	0.60	0.76	1.29	NA	NA	0.10	1.46	1.99	NA	NA	XXX
76005	26	A	Fluoroguide for spine inject	0.60	0.14	0.15	0.14	0.15	0.03	0.77	0.78	0.77	0.78	XXX
76005	TC	A	Fluoroguide for spine inject	0.00	0.62	1.14	NA	NA	0.07	0.69	1.21	NA	NA	XXX
76006		A	X-ray stress view	0.41	0.76	0.33	0.76	0.33	0.06	1.23	0.80	1.23	0.80	XXX
76010		A	X-ray, nose to rectum	0.18	0.57	0.58	NA	NA	0.03	0.78	0.79	NA	NA	XXX
76010	26	A	X-ray, nose to rectum	0.18	0.06	0.06	0.06	0.06	0.01	0.25	0.25	0.25	0.25	XXX
76010	TC	A	X-ray, nose to rectum	0.00	0.51	0.52	NA	NA	0.02	0.53	0.54	NA	NA	XXX
76012	26	A	Percut vertebroplasty fluor	1.31	0.47	0.47	0.47	0.47	0.10	1.88	1.88	1.88	1.88	XXX
76013	26	A	Percut vertebroplasty, ct	1.38	0.49	0.48	0.49	0.48	0.07	1.94	1.93	1.94	1.93	XXX
76020		A	X-rays for bone age	0.19	0.44	0.55	NA	NA	0.03	0.66	0.77	NA	NA	XXX
76020	26	A	X-rays for bone age	0.19	0.06	0.06	0.06	0.06	0.01	0.26	0.26	0.26	0.26	XXX
76020	TC	A	X-rays for bone age	0.00	0.37	0.48	NA	NA	0.02	0.39	0.50	NA	NA	XXX
76040		A	X-rays, bone evaluation	0.27	0.68	0.82	NA	NA	0.06	1.01	1.15	NA	NA	XXX
76040	26	A	X-rays, bone evaluation	0.27	0.10	0.09	0.10	0.09	0.01	0.38	0.37	0.38	0.37	XXX
76040	TC	A	X-rays, bone evaluation	0.00	0.58	0.73	NA	NA	0.05	0.63	0.78	NA	NA	XXX
76061		A	X-rays, bone survey	0.45	1.49	1.24	NA	NA	0.08	2.02	1.77	NA	NA	XXX
76061	26	A	X-rays, bone survey	0.45	0.16	0.15	0.16	0.15	0.02	0.63	0.62	0.63	0.62	XXX
76061	TC	A	X-rays, bone survey	0.00	1.34	1.09	NA	NA	0.06	1.40	1.15	NA	NA	XXX
76062		A	X-rays, bone survey	0.54	2.38	1.81	NA	NA	0.10	3.02	2.45	NA	NA	XXX
76062	26	A	X-rays, bone survey	0.54	0.19	0.18	0.19	0.18	0.02	0.75	0.74	0.75	0.74	XXX
76062	TC	A	X-rays, bone survey	0.00	2.19	1.63	NA	NA	0.08	2.27	1.71	NA	NA	XXX
76065		A	X-rays, bone evaluation	0.70	2.08	1.24	NA	NA	0.08	2.86	2.02	NA	NA	XXX
76065	26	A	X-rays, bone evaluation	0.70	0.21	0.23	0.21	0.23	0.03	0.94	0.96	0.94	0.96	XXX
76065	TC	A	X-rays, bone evaluation	0.00	1.87	1.02	NA	NA	0.05	1.92	1.07	NA	NA	XXX
76066		A	Joint survey, single view	0.31	0.66	1.07	NA	NA	0.08	1.05	1.46	NA	NA	XXX
76066	26	A	Joint survey, single view	0.31	0.11	0.10	0.11	0.10	0.02	0.44	0.43	0.44	0.43	XXX
76066	TC	A	Joint survey, single view	0.00	0.55	0.97	NA	NA	0.06	0.61	1.03	NA	NA	XXX
76070		A	Ct bone density, axial	0.25	4.94	3.52	NA	NA	0.17	5.36	3.94	NA	NA	XXX
76070	26	A	Ct bone density, axial	0.25	0.08	0.08	0.08	0.08	0.01	0.34	0.34	0.34	0.34	XXX
76070	TC	A	Ct bone density, axial	0.00	4.85	3.43	NA	NA	0.16	5.01	3.59	NA	NA	XXX
76071		A	Ct bone density, peripheral	0.22	0.78	2.47	NA	NA	0.06	1.06	2.75	NA	NA	XXX
76071	26	A	Ct bone density, peripheral	0.22	0.07	0.07	0.07	0.07	0.01	0.30	0.30	0.30	0.30	XXX
76071	TC	A	Ct bone density, peripheral	0.00	0.71	2.40	NA	NA	0.05	0.76	2.45	NA	NA	XXX
76075		A	Dxa bone density, axial	0.20	0.67	2.57	NA	NA	0.18	1.05	2.95	NA	NA	XXX
76075	26	A	Dxa bone density, axial	0.20	0.06	0.09	0.06	0.09	0.01	0.27	0.30	0.27	0.30	XXX
76075	TC	A	Dxa bone density, axial	0.00	0.61	2.48	NA	NA	0.17	0.78	2.65	NA	NA	XXX
76076		A	Dxa bone density/peripheral	0.22	0.57	0.77	NA	NA	0.06	0.85	1.05	NA	NA	XXX
76076	26	A	Dxa bone density/peripheral	0.22	0.06	0.08	0.06	0.08	0.01	0.29	0.31	0.29	0.31	XXX
76076	TC	A	Dxa bone density/peripheral	0.00	0.51	0.69	NA	NA	0.05	0.56	0.74	NA	NA	XXX
76077		A	Dxa bone density/v-fracture	0.17	0.42	0.71	NA	NA	0.06	0.65	0.94	NA	NA	XXX
76077	26	A	Dxa bone density/v-fracture	0.17	0.05	0.06	0.05	0.06	0.01	0.23	0.24	0.23	0.24	XXX
76077	TC	A	Dxa bone density/v-fracture	0.00	0.37	0.66	NA	NA	0.05	0.42	0.71	NA	NA	XXX
76078		A	Radiographic absorptiometry	0.20	0.38	0.71	NA	NA	0.06	0.64	0.97	NA	NA	XXX
76078	26	A	Radiographic absorptiometry	0.20	0.05	0.07	0.05	0.07	0.01	0.26	0.28	0.26	0.28	XXX
76078	TC	A	Radiographic absorptiometry	0.00	0.33	0.65	NA	NA	0.05	0.38	0.70	NA	NA	XXX
76080		A	X-ray exam of fistula	0.54	1.14	1.21	NA	NA	0.08	1.76	1.83	NA	NA	XXX
76080	26	A	X-ray exam of fistula	0.54	0.19	0.18	0.19	0.18	0.02	0.75	0.74	0.75	0.74	XXX
76080	TC	A	X-ray exam of fistula	0.00	0.94	1.02	NA	NA	0.06	1.00	1.08	NA	NA	XXX
76082		A	Computer mammogram add-on	0.06	0.21	0.38	NA	NA	0.02	0.29	0.46	NA	NA	ZZZ

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CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
76082	26	A	Computer mammogram add-on	0.06	0.02	0.02	0.02	0.02	0.01	0.09	0.09	0.09	0.09	ZZZ
76082	TC	A	Computer mammogram add-on	0.00	0.19	0.36	NA	NA	0.01	0.20	0.37	NA	NA	ZZZ
76083		A	Computer mammogram add-on	0.06	0.21	0.38	NA	NA	0.02	0.29	0.46	NA	NA	ZZZ
76083	26	A	Computer mammogram add-on	0.06	0.02	0.02	0.02	0.02	0.01	0.09	0.09	0.09	0.09	ZZZ
76083	TC	A	Computer mammogram add-on	0.00	0.19	0.36	NA	NA	0.01	0.20	0.37	NA	NA	ZZZ
76086		A	X-ray of mammary duct	0.36	1.28	2.38	NA	NA	0.16	1.80	2.90	NA	NA	XXX
76086	26	A	X-ray of mammary duct	0.36	0.12	0.12	0.12	0.12	0.02	0.50	0.50	0.50	0.50	XXX
76086	TC	A	X-ray of mammary duct	0.00	1.16	2.26	NA	NA	0.14	1.30	2.40	NA	NA	XXX
76088		A	X-ray of mammary ducts	0.45	1.75	3.30	NA	NA	0.21	2.41	3.96	NA	NA	XXX
76088	26	A	X-ray of mammary ducts	0.45	0.16	0.15	0.16	0.15	0.02	0.63	0.62	0.63	0.62	XXX
76088	TC	A	X-ray of mammary ducts	0.00	1.59	3.15	NA	NA	0.19	1.78	3.34	NA	NA	XXX
76090		A	Mammogram, one breast	0.70	1.70	1.39	NA	NA	0.09	2.49	2.18	NA	NA	XXX
76090	26	A	Mammogram, one breast	0.70	0.24	0.23	0.24	0.23	0.03	0.97	0.96	0.97	0.96	XXX
76090	TC	A	Mammogram, one breast	0.00	1.46	1.15	NA	NA	0.06	1.52	1.21	NA	NA	XXX
76091		A	Mammogram, both breasts	0.87	2.21	1.75	NA	NA	0.11	3.19	2.73	NA	NA	XXX
76091	26	A	Mammogram, both breasts	0.87	0.30	0.29	0.30	0.29	0.04	1.21	1.20	1.21	1.20	XXX
76091	TC	A	Mammogram, both breasts	0.00	1.92	1.46	NA	NA	0.07	1.99	1.53	NA	NA	XXX
76092		A	Mammogram, screening	0.70	1.49	1.47	NA	NA	0.10	2.29	2.27	NA	NA	XXX
76092	26	A	Mammogram, screening	0.70	0.24	0.23	0.24	0.23	0.03	0.97	0.96	0.97	0.96	XXX
76092	TC	A	Mammogram, screening	0.00	1.25	1.24	NA	NA	0.07	1.32	1.31	NA	NA	XXX
76093		A	Magnetic image, breast	1.63	22.81	19.35	NA	NA	0.99	25.43	21.97	NA	NA	XXX
76093	26	A	Magnetic image, breast	1.63	0.57	0.54	0.57	0.54	0.07	2.27	2.24	2.27	2.24	XXX
76093	TC	A	Magnetic image, breast	0.00	22.24	18.81	NA	NA	0.92	23.16	19.73	NA	NA	XXX
76094		A	Magnetic image, both breasts	1.63	22.75	24.07	NA	NA	1.31	25.69	27.01	NA	NA	XXX
76094	26	A	Magnetic image, both breasts	1.63	0.57	0.54	0.57	0.54	0.07	2.27	2.24	2.27	2.24	XXX
76094	TC	A	Magnetic image, both breasts	0.00	22.17	23.53	NA	NA	1.24	23.41	24.77	NA	NA	XXX
76095		A	Stereotactic breast biopsy	1.59	1.91	6.25	NA	NA	0.46	3.96	8.30	NA	NA	XXX
76095	26	A	Stereotactic breast biopsy	1.59	0.52	0.52	0.52	0.52	0.09	2.20	2.20	2.20	2.20	XXX
76095	TC	A	Stereotactic breast biopsy	0.00	1.39	5.73	NA	NA	0.37	1.76	6.10	NA	NA	XXX
76096		A	X-ray of needle wire, breast	0.56	0.86	1.33	NA	NA	0.09	1.51	1.98	NA	NA	XXX
76096	26	A	X-ray of needle wire, breast	0.56	0.19	0.18	0.19	0.18	0.02	0.77	0.76	0.77	0.76	XXX
76096	TC	A	X-ray of needle wire, breast	0.00	0.67	1.15	NA	NA	0.07	0.74	1.22	NA	NA	XXX
76098		A	X-ray exam, breast specimen	0.16	0.33	0.44	NA	NA	0.03	0.52	0.63	NA	NA	XXX
76098	26	A	X-ray exam, breast specimen	0.16	0.05	0.05	0.05	0.05	0.01	0.22	0.22	0.22	0.22	XXX
76098	TC	A	X-ray exam, breast specimen	0.00	0.28	0.39	NA	NA	0.02	0.30	0.41	NA	NA	XXX
76100		A	X-ray exam of body section	0.58	3.62	1.99	NA	NA	0.10	4.30	2.67	NA	NA	XXX
76100	26	A	X-ray exam of body section	0.58	0.21	0.20	0.21	0.20	0.03	0.82	0.81	0.82	0.81	XXX
76100	TC	A	X-ray exam of body section	0.00	3.42	1.79	NA	NA	0.07	3.49	1.86	NA	NA	XXX
76101		A	Complex body section x-ray	0.58	5.37	2.55	NA	NA	0.11	6.06	3.24	NA	NA	XXX
76101	26	A	Complex body section x-ray	0.58	0.19	0.19	0.19	0.19	0.03	0.80	0.80	0.80	0.80	XXX
76101	TC	A	Complex body section x-ray	0.00	5.18	2.36	NA	NA	0.08	5.26	2.44	NA	NA	XXX
76102		A	Complex body section x-rays	0.58	7.85	3.41	NA	NA	0.14	8.57	4.13	NA	NA	XXX
76102	26	A	Complex body section x-rays	0.58	0.19	0.19	0.19	0.19	0.03	0.80	0.80	0.80	0.80	XXX
76102	TC	A	Complex body section x-rays	0.00	7.66	3.22	NA	NA	0.11	7.77	3.33	NA	NA	XXX
76120		A	Cine/video x-rays	0.38	1.98	1.38	NA	NA	0.08	2.44	1.84	NA	NA	XXX
76120	26	A	Cine/video x-rays	0.38	0.15	0.14	0.15	0.14	0.02	0.55	0.54	0.55	0.54	XXX
76120	TC	A	Cine/video x-rays	0.00	1.83	1.25	NA	NA	0.06	1.89	1.31	NA	NA	XXX
76125		A	Cine/video x-rays add-on	0.27	0.11	0.68	NA	NA	0.06	0.44	1.01	NA	NA	ZZZ
76125	26	A	Cine/video x-rays add-on	0.27	0.11	0.10	0.11	0.10	0.01	0.39	0.38	0.39	0.38	ZZZ
76125	TC	A	Cine/video x-rays add-on	0.00	0.00	0.59	NA	NA	0.05	0.05	0.64	NA	NA	ZZZ
76150		A	X-ray exam, dry process	0.00	0.68	0.49	NA	NA	0.02	0.70	0.51	NA	NA	XXX
76355		A	Ct scan for localization	1.21	20.93	11.74	NA	NA	0.47	22.61	13.42	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
76355	26	A	Ct scan for localization	1.21	0.39	0.40	0.39	0.40	0.05	1.65	1.66	1.65	1.66	XXX
76355	TC	A	Ct scan for localization	0.00	20.55	11.35	NA	NA	0.42	20.97	11.77	NA	NA	XXX
76360		A	Ct scan for needle biopsy	1.16	2.42	7.10	NA	NA	0.47	4.05	8.73	NA	NA	XXX
76360	26	A	Ct scan for needle biopsy	1.16	0.41	0.39	0.41	0.39	0.05	1.62	1.60	1.62	1.60	XXX
76360	TC	A	Ct scan for needle biopsy	0.00	2.01	6.71	NA	NA	0.42	2.43	7.13	NA	NA	XXX
76362		A	Ct guide for tissue ablation	3.99	1.37	7.53	NA	NA	1.64	7.00	13.16	NA	NA	XXX
76362	26	A	Ct guide for tissue ablation	3.99	1.37	1.32	1.37	1.32	0.18	5.54	5.49	5.54	5.49	XXX
76362	TC	A	Ct guide for tissue ablation	0.00	0.00	6.21	NA	NA	1.46	1.46	7.67	NA	NA	XXX
76370		A	Ct scan for therapy guide	0.85	4.51	3.56	NA	NA	0.20	5.56	4.61	NA	NA	XXX
76370	26	A	Ct scan for therapy guide	0.85	0.25	0.27	0.25	0.27	0.04	1.14	1.16	1.14	1.16	XXX
76370	TC	A	Ct scan for therapy guide	0.00	4.26	3.29	NA	NA	0.16	4.42	3.45	NA	NA	XXX
76376		A	3d render w/o postprocess	0.20	1.46	2.99	NA	NA	0.10	1.76	3.29	NA	NA	XXX
76376	26	A	3d render w/o postprocess	0.20	0.07	0.07	0.07	0.07	0.02	0.29	0.29	0.29	0.29	XXX
76376	TC	A	3d render w/o postprocess	0.00	1.39	2.92	NA	NA	0.08	1.47	3.00	NA	NA	XXX
76377		A	3d rendering w/postprocess	0.79	1.45	3.14	NA	NA	0.39	2.63	4.32	NA	NA	XXX
76377	26	A	3d rendering w/postprocess	0.79	0.28	0.27	0.28	0.27	0.08	1.15	1.14	1.15	1.14	XXX
76377	TC	A	3d rendering w/postprocess	0.00	1.17	2.87	NA	NA	0.31	1.48	3.18	NA	NA	XXX
76380		A	CAT scan follow-up study	0.98	4.91	4.10	NA	NA	0.22	6.11	5.30	NA	NA	XXX
76380	26	A	CAT scan follow-up study	0.98	0.34	0.33	0.34	0.33	0.04	1.36	1.35	1.36	1.35	XXX
76380	TC	A	CAT scan follow-up study	0.00	4.57	3.78	NA	NA	0.18	4.75	3.96	NA	NA	XXX
76390		N	Mr spectroscopy	1.40	9.42	10.99	9.42	10.99	0.66	11.48	13.05	11.48	13.05	XXX
76390	26	N	Mr spectroscopy	1.40	0.31	0.43	0.31	0.43	0.07	1.78	1.90	1.78	1.90	XXX
76390	TC	N	Mr spectroscopy	0.00	9.11	10.56	9.11	10.56	0.59	9.70	11.15	9.70	11.15	XXX
76393		A	Mr guidance for needle place	1.50	10.17	11.34	NA	NA	0.64	12.31	13.48	NA	NA	XXX
76393	26	A	Mr guidance for needle place	1.50	0.53	0.51	0.53	0.51	0.09	2.12	2.10	2.12	2.10	XXX
76393	TC	A	Mr guidance for needle place	0.00	9.64	10.83	NA	NA	0.55	10.19	11.38	NA	NA	XXX
76394		A	Mri for tissue ablation	4.24	1.46	9.82	NA	NA	1.81	7.51	15.87	NA	NA	XXX
76394	26	A	Mri for tissue ablation	4.24	1.46	1.40	1.46	1.40	0.24	5.94	5.88	5.94	5.88	XXX
76394	TC	A	Mri for tissue ablation	0.00	0.00	8.42	NA	NA	1.57	1.57	9.99	NA	NA	XXX
76400		A	Magnetic image, bone marrow	1.60	15.25	12.63	NA	NA	0.66	17.51	14.89	NA	NA	XXX
76400	26	A	Magnetic image, bone marrow	1.60	0.59	0.54	0.59	0.54	0.07	2.26	2.21	2.26	2.21	XXX
76400	TC	A	Magnetic image, bone marrow	0.00	14.66	12.09	NA	NA	0.59	15.25	12.68	NA	NA	XXX
76506		A	Echo exam of head	0.63	2.90	1.97	NA	NA	0.14	3.67	2.74	NA	NA	XXX
76506	26	A	Echo exam of head	0.63	0.21	0.23	0.21	0.23	0.06	0.90	0.92	0.90	0.92	XXX
76506	TC	A	Echo exam of head	0.00	2.69	1.74	NA	NA	0.08	2.77	1.82	NA	NA	XXX
76510		A	Ophth us, b & quant a	1.55	2.27	2.72	NA	NA	0.10	3.92	4.37	NA	NA	XXX
76510	26	A	Ophth us, b & quant a	1.55	0.56	0.65	0.56	0.65	0.03	2.14	2.23	2.14	2.23	XXX
76510	TC	A	Ophth us, b & quant a	0.00	1.71	2.07	NA	NA	0.07	1.78	2.14	NA	NA	XXX
76511		A	Ophth us, quant a only	0.94	1.37	2.17	NA	NA	0.10	2.41	3.21	NA	NA	XXX
76511	26	A	Ophth us, quant a only	0.94	0.34	0.39	0.34	0.39	0.03	1.31	1.36	1.31	1.36	XXX
76511	TC	A	Ophth us, quant a only	0.00	1.04	1.79	NA	NA	0.07	1.11	1.86	NA	NA	XXX
76512		A	Ophth us, b w/non-quant a	0.94	1.17	1.97	NA	NA	0.12	2.23	3.03	NA	NA	XXX
76512	26	A	Ophth us, b w/non-quant a	0.94	0.33	0.40	0.33	0.40	0.02	1.29	1.36	1.29	1.36	XXX
76512	TC	A	Ophth us, b w/non-quant a	0.00	0.84	1.58	NA	NA	0.10	0.94	1.68	NA	NA	XXX
76513		A	Echo exam of eye, water bath	0.66	1.55	1.75	NA	NA	0.12	2.33	2.53	NA	NA	XXX
76513	26	A	Echo exam of eye, water bath	0.66	0.24	0.28	0.24	0.28	0.02	0.92	0.96	0.92	0.96	XXX
76513	TC	A	Echo exam of eye, water bath	0.00	1.31	1.47	NA	NA	0.10	1.41	1.57	NA	NA	XXX
76514		A	Echo exam of eye, thickness	0.17	0.13	0.13	NA	NA	0.02	0.32	0.32	NA	NA	XXX
76514	26	A	Echo exam of eye, thickness	0.17	0.06	0.08	0.06	0.08	0.01	0.24	0.26	0.24	0.26	XXX
76514	TC	A	Echo exam of eye, thickness	0.00	0.07	0.06	NA	NA	0.01	0.08	0.07	NA	NA	XXX
76516		A	Echo exam of eye	0.54	1.17	1.39	NA	NA	0.08	1.79	2.01	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
76516	26	A	Echo exam of eye	0.54	0.19	0.23	0.19	0.23	0.01	0.74	0.78	0.74	0.78	XXX
76516	TC	A	Echo exam of eye	0.00	0.99	1.16	NA	NA	0.07	1.06	1.23	NA	NA	XXX
76519		A	Echo exam of eye	0.54	1.30	1.49	NA	NA	0.08	1.92	2.11	NA	NA	XXX
76519	26	A	Echo exam of eye	0.54	0.19	0.23	0.19	0.23	0.01	0.74	0.78	0.74	0.78	XXX
76519	TC	A	Echo exam of eye	0.00	1.11	1.26	NA	NA	0.07	1.18	1.33	NA	NA	XXX
76529		A	Echo exam of eye	0.57	1.17	1.32	NA	NA	0.10	1.84	1.99	NA	NA	XXX
76529	26	A	Echo exam of eye	0.57	0.21	0.23	0.21	0.23	0.02	0.80	0.82	0.80	0.82	XXX
76529	TC	A	Echo exam of eye	0.00	0.97	1.09	NA	NA	0.08	1.05	1.17	NA	NA	XXX
76536		A	Us exam of head and neck	0.56	2.77	1.89	NA	NA	0.10	3.43	2.55	NA	NA	XXX
76536	26	A	Us exam of head and neck	0.56	0.18	0.18	0.18	0.18	0.02	0.76	0.76	0.76	0.76	XXX
76536	TC	A	Us exam of head and neck	0.00	2.59	1.71	NA	NA	0.08	2.67	1.79	NA	NA	XXX
76604		A	Us exam, chest, b-scan	0.55	1.90	1.59	NA	NA	0.09	2.54	2.23	NA	NA	XXX
76604	26	A	Us exam, chest, b-scan	0.55	0.19	0.18	0.19	0.18	0.02	0.76	0.75	0.76	0.75	XXX
76604	TC	A	Us exam, chest, b-scan	0.00	1.71	1.41	NA	NA	0.07	1.78	1.48	NA	NA	XXX
76645		A	Us exam, breast(s)	0.54	2.20	1.47	NA	NA	0.08	2.82	2.09	NA	NA	XXX
76645	26	A	Us exam, breast(s)	0.54	0.18	0.18	0.18	0.18	0.02	0.74	0.74	0.74	0.74	XXX
76645	TC	A	Us exam, breast(s)	0.00	2.01	1.29	NA	NA	0.06	2.07	1.35	NA	NA	XXX
76700		A	Us exam, abdom, complete	0.81	3.13	2.47	NA	NA	0.15	4.09	3.43	NA	NA	XXX
76700	26	A	Us exam, abdom, complete	0.81	0.28	0.27	0.28	0.27	0.04	1.13	1.12	1.13	1.12	XXX
76700	TC	A	Us exam, abdom, complete	0.00	2.86	2.20	NA	NA	0.11	2.97	2.31	NA	NA	XXX
76705		A	Echo exam of abdomen	0.59	2.45	1.82	NA	NA	0.11	3.15	2.52	NA	NA	XXX
76705	26	A	Echo exam of abdomen	0.59	0.20	0.19	0.20	0.19	0.03	0.82	0.81	0.82	0.81	XXX
76705	TC	A	Echo exam of abdomen	0.00	2.25	1.63	NA	NA	0.08	2.33	1.71	NA	NA	XXX
76770		A	Us exam abdo back wall, comp	0.74	3.04	2.43	NA	NA	0.14	3.92	3.31	NA	NA	XXX
76770	26	A	Us exam abdo back wall, comp	0.74	0.26	0.25	0.26	0.25	0.03	1.03	1.02	1.03	1.02	XXX
76770	TC	A	Us exam abdo back wall, comp	0.00	2.78	2.18	NA	NA	0.11	2.89	2.29	NA	NA	XXX
76775		A	Us exam abdo back wall, lim	0.58	2.52	1.84	NA	NA	0.11	3.21	2.53	NA	NA	XXX
76775	26	A	Us exam abdo back wall, lim	0.58	0.21	0.20	0.21	0.20	0.03	0.82	0.81	0.82	0.81	XXX
76775	TC	A	Us exam abdo back wall, lim	0.00	2.31	1.64	NA	NA	0.08	2.39	1.72	NA	NA	XXX
76778		A	Us exam kidney transplant	0.74	3.37	2.51	NA	NA	0.14	4.25	3.39	NA	NA	XXX
76778	26	A	Us exam kidney transplant	0.74	0.25	0.24	0.25	0.24	0.03	1.02	1.01	1.02	1.01	XXX
76778	TC	A	Us exam kidney transplant	0.00	3.11	2.26	NA	NA	0.11	3.22	2.37	NA	NA	XXX
76800		A	Us exam, spinal canal	1.13	2.31	1.90	NA	NA	0.13	3.57	3.16	NA	NA	XXX
76800	26	A	Us exam, spinal canal	1.13	0.29	0.33	0.29	0.33	0.05	1.47	1.51	1.47	1.51	XXX
76800	TC	A	Us exam, spinal canal	0.00	2.02	1.57	NA	NA	0.08	2.10	1.65	NA	NA	XXX
76801		A	Ob us < 14 wks, single fetus	0.99	2.53	2.47	NA	NA	0.16	3.68	3.62	NA	NA	XXX
76801	26	A	Ob us < 14 wks, single fetus	0.99	0.32	0.34	0.32	0.34	0.04	1.35	1.37	1.35	1.37	XXX
76801	TC	A	Ob us < 14 wks, single fetus	0.00	2.22	2.14	NA	NA	0.12	2.34	2.26	NA	NA	XXX
76802		A	Ob us < 14 wks, addl fetus	0.83	0.99	1.25	NA	NA	0.16	1.98	2.24	NA	NA	ZZZ
76802	26	A	Ob us < 14 wks, addl fetus	0.83	0.26	0.28	0.26	0.28	0.04	1.13	1.15	1.13	1.15	ZZZ
76802	TC	A	Ob us < 14 wks, addl fetus	0.00	0.73	0.97	NA	NA	0.12	0.85	1.09	NA	NA	ZZZ
76805		A	Ob us >/= 14 wks, sngl fetus	0.99	3.10	2.61	NA	NA	0.16	4.25	3.76	NA	NA	XXX
76805	26	A	Ob us >/= 14 wks, sngl fetus	0.99	0.30	0.33	0.30	0.33	0.04	1.33	1.36	1.33	1.36	XXX
76805	TC	A	Ob us >/= 14 wks, sngl fetus	0.00	2.80	2.28	NA	NA	0.12	2.92	2.40	NA	NA	XXX
76810		A	Ob us >/= 14 wks, addl fetus	0.98	1.68	1.46	NA	NA	0.26	2.92	2.70	NA	NA	ZZZ
76810	26	A	Ob us >/= 14 wks, addl fetus	0.98	0.30	0.33	0.30	0.33	0.04	1.32	1.35	1.32	1.35	ZZZ
76810	TC	A	Ob us >/= 14 wks, addl fetus	0.00	1.39	1.14	NA	NA	0.22	1.61	1.36	NA	NA	ZZZ
76811		A	Ob us, detailed, sngl fetus	1.90	3.06	3.95	NA	NA	0.52	5.48	6.37	NA	NA	XXX
76811	26	A	Ob us, detailed, sngl fetus	1.90	0.54	0.67	0.54	0.67	0.09	2.53	2.66	2.53	2.66	XXX
76811	TC	A	Ob us, detailed, sngl fetus	0.00	2.52	3.29	NA	NA	0.43	2.95	3.72	NA	NA	XXX
76812		A	Ob us, detailed, addl fetus	1.78	3.97	2.28	NA	NA	0.49	6.24	4.55	NA	NA	ZZZ

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
76812	26	A	Ob us, detailed, addl fetus	1.78	0.51	0.62	0.51	0.62	0.08	2.37	2.48	2.37	2.48	ZZZ
76812	TC	A	Ob us, detailed, addl fetus	0.00	3.46	1.65	NA	NA	0.41	3.87	2.06	NA	NA	ZZZ
76815		A	Ob us, limited, fetus(s)	0.65	1.83	1.70	NA	NA	0.11	2.59	2.46	NA	NA	XXX
76815	26	A	Ob us, limited, fetus(s)	0.65	0.19	0.22	0.19	0.22	0.03	0.87	0.90	0.87	0.90	XXX
76815	TC	A	Ob us, limited, fetus(s)	0.00	1.63	1.47	NA	NA	0.08	1.71	1.55	NA	NA	XXX
76816		A	Ob us, follow-up, per fetus	0.85	2.39	1.67	NA	NA	0.10	3.34	2.62	NA	NA	XXX
76816	26	A	Ob us, follow-up, per fetus	0.85	0.24	0.30	0.24	0.30	0.04	1.13	1.19	1.13	1.19	XXX
76816	TC	A	Ob us, follow-up, per fetus	0.00	2.15	1.37	NA	NA	0.06	2.21	1.43	NA	NA	XXX
76817		A	Transvaginal us, obstetric	0.75	2.06	1.85	NA	NA	0.09	2.90	2.69	NA	NA	XXX
76817	26	A	Transvaginal us, obstetric	0.75	0.23	0.25	0.23	0.25	0.03	1.01	1.03	1.01	1.03	XXX
76817	TC	A	Transvaginal us, obstetric	0.00	1.83	1.60	NA	NA	0.06	1.89	1.66	NA	NA	XXX
76818		A	Fetal biophys profile w/nst	1.05	2.23	2.06	NA	NA	0.15	3.43	3.26	NA	NA	XXX
76818	26	A	Fetal biophys profile w/nst	1.05	0.30	0.37	0.30	0.37	0.05	1.40	1.47	1.40	1.47	XXX
76818	TC	A	Fetal biophys profile w/nst	0.00	1.92	1.69	NA	NA	0.10	2.02	1.79	NA	NA	XXX
76819		A	Fetal biophys profil w/o nst	0.77	1.65	1.83	NA	NA	0.13	2.55	2.73	NA	NA	XXX
76819	26	A	Fetal biophys profil w/o nst	0.77	0.23	0.27	0.23	0.27	0.03	1.03	1.07	1.03	1.07	XXX
76819	TC	A	Fetal biophys profil w/o nst	0.00	1.42	1.56	NA	NA	0.10	1.52	1.66	NA	NA	XXX
76820		A	Umbilical artery echo	0.50	0.57	1.49	NA	NA	0.15	1.22	2.14	NA	NA	XXX
76820	26	A	Umbilical artery echo	0.50	0.14	0.18	0.14	0.18	0.03	0.67	0.71	0.67	0.71	XXX
76820	TC	A	Umbilical artery echo	0.00	0.43	1.32	NA	NA	0.12	0.55	1.44	NA	NA	XXX
76821		A	Middle cerebral artery echo	0.70	1.88	1.88	NA	NA	0.15	2.73	2.73	NA	NA	XXX
76821	26	A	Middle cerebral artery echo	0.70	0.20	0.25	0.20	0.25	0.03	0.93	0.98	0.93	0.98	XXX
76821	TC	A	Middle cerebral artery echo	0.00	1.68	1.63	NA	NA	0.12	1.80	1.75	NA	NA	XXX
76825		A	Echo exam of fetal heart	1.67	4.34	3.02	NA	NA	0.18	6.19	4.87	NA	NA	XXX
76825	26	A	Echo exam of fetal heart	1.67	0.48	0.57	0.48	0.57	0.07	2.22	2.31	2.22	2.31	XXX
76825	TC	A	Echo exam of fetal heart	0.00	3.86	2.45	NA	NA	0.11	3.97	2.56	NA	NA	XXX
76826		A	Echo exam of fetal heart	0.83	2.73	1.43	NA	NA	0.08	3.64	2.34	NA	NA	XXX
76826	26	A	Echo exam of fetal heart	0.83	0.23	0.28	0.23	0.28	0.03	1.09	1.14	1.09	1.14	XXX
76826	TC	A	Echo exam of fetal heart	0.00	2.50	1.16	NA	NA	0.05	2.55	1.21	NA	NA	XXX
76827		A	Echo exam of fetal heart	0.58	1.07	1.72	NA	NA	0.14	1.79	2.44	NA	NA	XXX
76827	26	A	Echo exam of fetal heart	0.58	0.17	0.20	0.17	0.20	0.02	0.77	0.80	0.77	0.80	XXX
76827	TC	A	Echo exam of fetal heart	0.00	0.90	1.52	NA	NA	0.12	1.02	1.64	NA	NA	XXX
76828		A	Echo exam of fetal heart	0.56	0.63	1.16	NA	NA	0.11	1.30	1.83	NA	NA	XXX
76828	26	A	Echo exam of fetal heart	0.56	0.15	0.20	0.15	0.20	0.03	0.74	0.79	0.74	0.79	XXX
76828	TC	A	Echo exam of fetal heart	0.00	0.48	0.95	NA	NA	0.08	0.56	1.03	NA	NA	XXX
76830		A	Transvaginal us, non-ob	0.69	2.85	2.03	NA	NA	0.13	3.67	2.85	NA	NA	XXX
76830	26	A	Transvaginal us, non-ob	0.69	0.22	0.23	0.22	0.23	0.03	0.94	0.95	0.94	0.95	XXX
76830	TC	A	Transvaginal us, non-ob	0.00	2.62	1.80	NA	NA	0.10	2.72	1.90	NA	NA	XXX
76831		A	Echo exam, uterus	0.72	2.76	2.02	NA	NA	0.13	3.61	2.87	NA	NA	XXX
76831	26	A	Echo exam, uterus	0.72	0.21	0.24	0.21	0.24	0.03	0.96	0.99	0.96	0.99	XXX
76831	TC	A	Echo exam, uterus	0.00	2.55	1.78	NA	NA	0.10	2.65	1.88	NA	NA	XXX
76856		A	Us exam, pelvic, complete	0.69	2.90	2.04	NA	NA	0.13	3.72	2.86	NA	NA	XXX
76856	26	A	Us exam, pelvic, complete	0.69	0.24	0.23	0.24	0.23	0.03	0.96	0.95	0.96	0.95	XXX
76856	TC	A	Us exam, pelvic, complete	0.00	2.67	1.81	NA	NA	0.10	2.77	1.91	NA	NA	XXX
76857		A	Us exam, pelvic, limited	0.38	2.59	2.02	NA	NA	0.08	3.05	2.48	NA	NA	XXX
76857	26	A	Us exam, pelvic, limited	0.38	0.15	0.13	0.15	0.13	0.02	0.55	0.53	0.55	0.53	XXX
76857	TC	A	Us exam, pelvic, limited	0.00	2.44	1.89	NA	NA	0.06	2.50	1.95	NA	NA	XXX
76870		A	Us exam, scrotum	0.64	2.94	2.03	NA	NA	0.13	3.71	2.80	NA	NA	XXX
76870	26	A	Us exam, scrotum	0.64	0.23	0.22	0.23	0.22	0.03	0.90	0.89	0.90	0.89	XXX
76870	TC	A	Us exam, scrotum	0.00	2.72	1.82	NA	NA	0.10	2.82	1.92	NA	NA	XXX
76872		A	Us, transrectal	0.69	3.50	2.56	NA	NA	0.14	4.33	3.39	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
76872	26	A	Us, transrectal	0.69	0.28	0.24	0.28	0.24	0.04	1.01	0.97	1.01	0.97	XXX
76872	TC	A	Us, transrectal	0.00	3.22	2.33	NA	NA	0.10	3.32	2.43	NA	NA	XXX
76873		A	Echograp trans r, pros study	1.55	3.45	2.82	NA	NA	0.25	5.25	4.62	NA	NA	XXX
76873	26	A	Echograp trans r, pros study	1.55	0.53	0.51	0.53	0.51	0.09	2.17	2.15	2.17	2.15	XXX
76873	TC	A	Echograp trans r, pros study	0.00	2.92	2.31	NA	NA	0.16	3.08	2.47	NA	NA	XXX
76880		A	Us exam, extremity	0.59	3.25	2.02	NA	NA	0.11	3.95	2.72	NA	NA	XXX
76880	26	A	Us exam, extremity	0.59	0.18	0.19	0.18	0.19	0.03	0.80	0.81	0.80	0.81	XXX
76880	TC	A	Us exam, extremity	0.00	3.07	1.83	NA	NA	0.08	3.15	1.91	NA	NA	XXX
76885		A	Us exam infant hips, dynamic	0.74	3.36	2.16	NA	NA	0.13	4.23	3.03	NA	NA	XXX
76885	26	A	Us exam infant hips, dynamic	0.74	0.24	0.24	0.24	0.24	0.03	1.01	1.01	1.01	1.01	XXX
76885	TC	A	Us exam infant hips, dynamic	0.00	3.11	1.92	NA	NA	0.10	3.21	2.02	NA	NA	XXX
76886		A	Us exam infant hips, static	0.62	2.36	1.81	NA	NA	0.11	3.09	2.54	NA	NA	XXX
76886	26	A	Us exam infant hips, static	0.62	0.19	0.20	0.19	0.20	0.03	0.84	0.85	0.84	0.85	XXX
76886	TC	A	Us exam infant hips, static	0.00	2.18	1.61	NA	NA	0.08	2.26	1.69	NA	NA	XXX
76930		A	Echo guide, cardiocentesis	0.67	2.15	1.87	NA	NA	0.12	2.94	2.66	NA	NA	XXX
76930	26	A	Echo guide, cardiocentesis	0.67	0.35	0.28	0.35	0.28	0.02	1.04	0.97	1.04	0.97	XXX
76930	TC	A	Echo guide, cardiocentesis	0.00	1.80	1.59	NA	NA	0.10	1.90	1.69	NA	NA	XXX
76932		A	Echo guide for heart biopsy	0.67	0.36	1.42	NA	NA	0.12	1.15	2.21	NA	NA	XXX
76932	26	A	Echo guide for heart biopsy	0.67	0.36	0.28	0.36	0.28	0.02	1.05	0.97	1.05	0.97	XXX
76932	TC	A	Echo guide for heart biopsy	0.00	0.00	1.14	NA	NA	0.10	0.10	1.24	NA	NA	XXX
76936		A	Echo guide for artery repair	1.99	6.28	6.80	NA	NA	0.47	8.74	9.26	NA	NA	XXX
76936	26	A	Echo guide for artery repair	1.99	0.72	0.68	0.72	0.68	0.13	2.84	2.80	2.84	2.80	XXX
76936	TC	A	Echo guide for artery repair	0.00	5.56	6.12	NA	NA	0.34	5.90	6.46	NA	NA	XXX
76937		A	Us guide, vascular access	0.30	0.65	0.52	NA	NA	0.13	1.08	0.95	NA	NA	ZZZ
76937	26	A	Us guide, vascular access	0.30	0.10	0.10	0.10	0.10	0.03	0.43	0.43	0.43	0.43	ZZZ
76937	DTC	A	Us guide, vascular access	0.00	0.54	0.42	NA	NA	0.10	0.64	0.52	NA	NA	ZZZ
76940		A	Us guide, tissue ablation	2.00	0.63	1.79	NA	NA	0.60	3.23	4.39	NA	NA	XXX
76940	26	A	Us guide, tissue ablation	2.00	0.63	0.65	0.63	0.65	0.31	2.94	2.96	2.94	2.96	XXX
76940	TC	A	Us guide, tissue ablation	0.00	0.00	1.14	NA	NA	0.29	0.29	1.43	NA	NA	XXX
76941		A	Echo guide for transfusion	1.34	0.43	1.61	NA	NA	0.15	1.92	3.10	NA	NA	XXX
76941	26	A	Echo guide for transfusion	1.34	0.43	0.46	0.43	0.46	0.07	1.84	1.87	1.84	1.87	XXX
76941	TC	A	Echo guide for transfusion	0.00	0.00	1.15	NA	NA	0.08	0.08	1.23	NA	NA	XXX
76942		A	Echo guide for biopsy	0.67	4.98	3.53	NA	NA	0.13	5.78	4.33	NA	NA	XXX
76942	26	A	Echo guide for biopsy	0.67	0.24	0.23	0.24	0.23	0.03	0.94	0.93	0.94	0.93	XXX
76942	TC	A	Echo guide for biopsy	0.00	4.73	3.30	NA	NA	0.10	4.83	3.40	NA	NA	XXX
76945		A	Echo guide, villus sampling	0.67	0.21	1.37	NA	NA	0.11	0.99	2.15	NA	NA	XXX
76945	26	A	Echo guide, villus sampling	0.67	0.21	0.22	0.21	0.22	0.03	0.91	0.92	0.91	0.92	XXX
76945	TC	A	Echo guide, villus sampling	0.00	0.00	1.15	NA	NA	0.08	0.08	1.23	NA	NA	XXX
76946		A	Echo guide for amniocentesis	0.38	0.45	1.36	NA	NA	0.12	0.95	1.86	NA	NA	XXX
76946	26	A	Echo guide for amniocentesis	0.38	0.11	0.13	0.11	0.13	0.02	0.51	0.53	0.51	0.53	XXX
76946	TC	A	Echo guide for amniocentesis	0.00	0.34	1.23	NA	NA	0.10	0.44	1.33	NA	NA	XXX
76948		A	Echo guide, ova aspiration	0.38	0.44	1.35	NA	NA	0.12	0.94	1.85	NA	NA	XXX
76948	26	A	Echo guide, ova aspiration	0.38	0.10	0.12	0.10	0.12	0.02	0.50	0.52	0.50	0.52	XXX
76948	TC	A	Echo guide, ova aspiration	0.00	0.34	1.23	NA	NA	0.10	0.44	1.33	NA	NA	XXX
76950		A	Echo guidance radiotherapy	0.58	1.17	1.42	NA	NA	0.10	1.85	2.10	NA	NA	XXX
76950	26	A	Echo guidance radiotherapy	0.58	0.16	0.18	0.16	0.18	0.03	0.77	0.79	0.77	0.79	XXX
76950	TC	A	Echo guidance radiotherapy	0.00	1.01	1.24	NA	NA	0.07	1.08	1.31	NA	NA	XXX
76965		A	Echo guidance radiotherapy	1.34	1.20	4.82	NA	NA	0.37	2.91	6.53	NA	NA	XXX
76965	26	A	Echo guidance radiotherapy	1.34	0.49	0.45	0.49	0.45	0.08	1.91	1.87	1.91	1.87	XXX
76965	TC	A	Echo guidance radiotherapy	0.00	0.71	4.37	NA	NA	0.29	1.00	4.66	NA	NA	XXX
76970		A	Ultrasound exam follow-up	0.40	2.15	1.42	NA	NA	0.08	2.63	1.90	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
76970	26	A	Ultrasound exam follow-up	0.40	0.11	0.13	0.11	0.13	0.02	0.53	0.55	0.53	0.55	XXX
76970	TC	A	Ultrasound exam follow-up	0.00	2.04	1.30	NA	NA	0.06	2.10	1.36	NA	NA	XXX
76975		A	GI endoscopic ultrasound	0.81	0.31	1.43	NA	NA	0.14	1.26	2.38	NA	NA	XXX
76975	26	A	GI endoscopic ultrasound	0.81	0.31	0.29	0.31	0.29	0.04	1.16	1.14	1.16	1.14	XXX
76975	TC	A	GI endoscopic ultrasound	0.00	0.00	1.14	NA	NA	0.10	0.10	1.24	NA	NA	XXX
76977		A	Us bone density measure	0.05	0.11	0.66	NA	NA	0.06	0.22	0.77	NA	NA	XXX
76977	26	A	Us bone density measure	0.05	0.01	0.02	0.01	0.02	0.01	0.07	0.08	0.07	0.08	XXX
76977	TC	A	Us bone density measure	0.00	0.09	0.64	NA	NA	0.05	0.14	0.69	NA	NA	XXX
76986		A	Ultrasound guide intraoper	1.20	0.35	2.36	NA	NA	0.27	1.82	3.83	NA	NA	XXX
76986	26	A	Ultrasound guide intraoper	1.20	0.35	0.39	0.35	0.39	0.13	1.68	1.72	1.68	1.72	XXX
76986	TC	A	Ultrasound guide intraoper	0.00	0.00	1.97	NA	NA	0.14	0.14	2.11	NA	NA	XXX
77261		A	Radiation therapy planning	1.39	0.42	0.49	0.42	0.49	0.07	1.88	1.95	1.88	1.95	XXX
77262		A	Radiation therapy planning	2.11	0.59	0.71	0.59	0.71	0.11	2.81	2.93	2.81	2.93	XXX
77263		A	Radiation therapy planning	3.14	0.88	1.05	0.88	1.05	0.16	4.18	4.35	4.18	4.35	XXX
77280		A	Set radiation therapy field	0.70	4.39	3.87	NA	NA	0.22	5.31	4.79	NA	NA	XXX
77280	26	A	Set radiation therapy field	0.70	0.20	0.22	0.20	0.22	0.04	0.94	0.96	0.94	0.96	XXX
77280	TC	A	Set radiation therapy field	0.00	4.20	3.66	NA	NA	0.18	4.38	3.84	NA	NA	XXX
77285		A	Set radiation therapy field	1.05	8.00	6.45	NA	NA	0.35	9.40	7.85	NA	NA	XXX
77285	26	A	Set radiation therapy field	1.05	0.29	0.33	0.29	0.33	0.05	1.39	1.43	1.39	1.43	XXX
77285	TC	A	Set radiation therapy field	0.00	7.70	6.12	NA	NA	0.30	8.00	6.42	NA	NA	XXX
77290		A	Set radiation therapy field	1.56	13.37	8.62	NA	NA	0.43	15.36	10.61	NA	NA	XXX
77290	26	A	Set radiation therapy field	1.56	0.44	0.49	0.44	0.49	0.08	2.08	2.13	2.08	2.13	XXX
77290	TC	A	Set radiation therapy field	0.00	12.93	8.13	NA	NA	0.35	13.28	8.48	NA	NA	XXX
77295		A	Set radiation therapy field	4.56	7.00	23.85	NA	NA	1.71	13.27	30.12	NA	NA	XXX
77295	26	A	Set radiation therapy field	4.56	1.28	1.42	1.28	1.42	0.23	6.07	6.21	6.07	6.21	XXX
77295	TC	A	Set radiation therapy field	0.00	5.72	22.44	NA	NA	1.48	7.20	23.92	NA	NA	XXX
77300		A	Radiation therapy dose plan	0.62	1.10	1.43	NA	NA	0.10	1.82	2.15	NA	NA	XXX
77300	26	A	Radiation therapy dose plan	0.62	0.17	0.19	0.17	0.19	0.03	0.82	0.84	0.82	0.84	XXX
77300	TC	A	Radiation therapy dose plan	0.00	0.92	1.24	NA	NA	0.07	0.99	1.31	NA	NA	XXX
77301		A	Radiotherapy dose plan, imrt	7.99	54.08	36.46	NA	NA	1.88	63.95	46.33	NA	NA	XXX
77301	26	A	Radiotherapy dose plan, imrt	7.99	2.24	2.49	2.24	2.49	0.40	10.63	10.88	10.63	10.88	XXX
77301	TC	A	Radiotherapy dose plan, imrt	0.00	51.84	33.97	NA	NA	1.48	53.32	35.45	NA	NA	XXX
77305		A	Teletx isodose plan simple	0.70	0.86	1.79	NA	NA	0.15	1.71	2.64	NA	NA	XXX
77305	26	A	Teletx isodose plan simple	0.70	0.20	0.22	0.20	0.22	0.04	0.94	0.96	0.94	0.96	XXX
77305	TC	A	Teletx isodose plan simple	0.00	0.66	1.57	NA	NA	0.11	0.77	1.68	NA	NA	XXX
77310		A	Teletx isodose plan intermed	1.05	1.19	2.31	NA	NA	0.18	2.42	3.54	NA	NA	XXX
77310	26	A	Teletx isodose plan intermed	1.05	0.29	0.33	0.29	0.33	0.05	1.39	1.43	1.39	1.43	XXX
77310	TC	A	Teletx isodose plan intermed	0.00	0.90	1.98	NA	NA	0.13	1.03	2.11	NA	NA	XXX
77315		A	Teletx isodose plan complex	1.56	1.99	2.88	NA	NA	0.22	3.77	4.66	NA	NA	XXX
77315	26	A	Teletx isodose plan complex	1.56	0.44	0.49	0.44	0.49	0.08	2.08	2.13	2.08	2.13	XXX
77315	TC	A	Teletx isodose plan complex	0.00	1.56	2.39	NA	NA	0.14	1.70	2.53	NA	NA	XXX
77321		A	Special teletx port plan	0.95	1.40	3.61	NA	NA	0.26	2.61	4.82	NA	NA	XXX
77321	26	A	Special teletx port plan	0.95	0.27	0.29	0.27	0.29	0.05	1.27	1.29	1.27	1.29	XXX
77321	TC	A	Special teletx port plan	0.00	1.13	3.32	NA	NA	0.21	1.34	3.53	NA	NA	XXX
77326		A	Brachytx isodose calc simp	0.93	2.81	2.71	NA	NA	0.18	3.92	3.82	NA	NA	XXX
77326	26	A	Brachytx isodose calc simp	0.93	0.26	0.29	0.26	0.29	0.05	1.24	1.27	1.24	1.27	XXX
77326	TC	A	Brachytx isodose calc simp	0.00	2.56	2.42	NA	NA	0.13	2.69	2.55	NA	NA	XXX
77327		A	Brachytx isodose calc interm	1.39	3.89	3.91	NA	NA	0.25	5.53	5.55	NA	NA	XXX
77327	26	A	Brachytx isodose calc interm	1.39	0.39	0.43	0.39	0.43	0.07	1.85	1.89	1.85	1.89	XXX
77327	TC	A	Brachytx isodose calc interm	0.00	3.50	3.49	NA	NA	0.18	3.68	3.67	NA	NA	XXX
77328		A	Brachytx isodose plan compl	2.09	5.00	5.48	NA	NA	0.36	7.45	7.93	NA	NA	XXX
77328	26	A	Brachytx isodose plan compl	2.09	0.59	0.65	0.59	0.65	0.11	2.79	2.85	2.79	2.85	XXX
77328	TC	A	Brachytx isodose plan compl	0.00	4.41	4.83	NA	NA	0.25	4.66	5.08	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
77331		A	Special radiation dosimetry	0.87	0.73	0.77	NA	NA	0.06	1.66	1.70	NA	NA	XXX
77331	26	A	Special radiation dosimetry	0.87	0.24	0.27	0.24	0.27	0.04	1.15	1.18	1.15	1.18	XXX
77331	TC	A	Special radiation dosimetry	0.00	0.49	0.50	NA	NA	0.02	0.51	0.52	NA	NA	XXX
77332		A	Radiation treatment aid(s)	0.54	1.54	1.52	NA	NA	0.10	2.18	2.16	NA	NA	XXX
77332	26	A	Radiation treatment aid(s)	0.54	0.15	0.17	0.15	0.17	0.03	0.72	0.74	0.72	0.74	XXX
77332	TC	A	Radiation treatment aid(s)	0.00	1.38	1.35	NA	NA	0.07	1.45	1.42	NA	NA	XXX
77333		A	Radiation treatment aid(s)	0.84	0.47	1.75	NA	NA	0.15	1.46	2.74	NA	NA	XXX
77333	26	A	Radiation treatment aid(s)	0.84	0.24	0.26	0.24	0.26	0.04	1.12	1.14	1.12	1.14	XXX
77333	TC	A	Radiation treatment aid(s)	0.00	0.23	1.48	NA	NA	0.11	0.34	1.59	NA	NA	XXX
77334		A	Radiation treatment aid(s)	1.24	2.64	3.41	NA	NA	0.23	4.11	4.88	NA	NA	XXX
77334	26	A	Radiation treatment aid(s)	1.24	0.35	0.39	0.35	0.39	0.06	1.65	1.69	1.65	1.69	XXX
77334	TC	A	Radiation treatment aid(s)	0.00	2.30	3.02	NA	NA	0.17	2.47	3.19	NA	NA	XXX
77336		A	Radiation physics consult	0.00	0.93	2.48	NA	NA	0.16	1.09	2.64	NA	NA	XXX
77370		A	Radiation physics consult	0.00	2.36	3.22	NA	NA	0.18	2.54	3.40	NA	NA	XXX
77401		A	Radiation treatment delivery	0.00	0.50	1.46	NA	NA	0.11	0.61	1.57	NA	NA	XXX
77402		A	Radiation treatment delivery	0.00	4.20	2.39	NA	NA	0.11	4.31	2.50	NA	NA	XXX
77403		A	Radiation treatment delivery	0.00	3.77	2.28	NA	NA	0.11	3.88	2.39	NA	NA	XXX
77404		A	Radiation treatment delivery	0.00	4.22	2.39	NA	NA	0.11	4.33	2.50	NA	NA	XXX
77406		A	Radiation treatment delivery	0.00	4.23	2.39	NA	NA	0.11	4.34	2.50	NA	NA	XXX
77407		A	Radiation treatment delivery	0.00	5.44	2.94	NA	NA	0.12	5.56	3.06	NA	NA	XXX
77408		A	Radiation treatment delivery	0.00	5.24	2.89	NA	NA	0.12	5.36	3.01	NA	NA	XXX
77409		A	Radiation treatment delivery	0.00	5.84	3.04	NA	NA	0.12	5.96	3.16	NA	NA	XXX
77411		A	Radiation treatment delivery	0.00	5.73	3.01	NA	NA	0.12	5.85	3.13	NA	NA	XXX
77412		A	Radiation treatment delivery	0.00	6.85	3.47	NA	NA	0.13	6.98	3.60	NA	NA	XXX
77413		A	Radiation treatment delivery	0.00	6.86	3.47	NA	NA	0.13	6.99	3.60	NA	NA	XXX
77414		A	Radiation treatment delivery	0.00	7.74	3.69	NA	NA	0.13	7.87	3.82	NA	NA	XXX
77416		A	Radiation treatment delivery	0.00	7.73	3.69	NA	NA	0.13	7.86	3.82	NA	NA	XXX
77417		A	Radiology port film(s)	0.00	0.36	0.53	NA	NA	0.04	0.40	0.57	NA	NA	XXX
77418		A	Radiation tx delivery, imrt	0.00	13.15	16.84	NA	NA	0.13	13.28	16.97	NA	NA	XXX
77421		A	Stereoscopic x-ray guidance	0.39	1.97	3.11	NA	NA	0.12	2.48	3.62	NA	NA	XXX
77421	26	A	Stereoscopic x-ray guidance	0.39	0.11	0.13	0.11	0.13	0.02	0.52	0.54	0.52	0.54	XXX
77421	TC	A	Stereoscopic x-ray guidance	0.00	1.86	2.99	NA	NA	0.10	1.96	3.09	NA	NA	XXX
77422		A	Neutron beam tx, simple	0.00	7.59	3.18	NA	NA	0.13	7.72	3.31	NA	NA	XXX
77423		A	Neutron beam tx, complex	0.00	12.53	4.83	NA	NA	0.13	12.66	4.96	NA	NA	XXX
77427		A	Radiation tx management, x5	3.31	1.10	1.07	1.10	1.07	0.17	4.58	4.55	4.58	4.55	XXX
77431		A	Radiation therapy management	1.81	0.69	0.68	0.69	0.68	0.09	2.59	2.58	2.59	2.58	XXX
77432		A	Stereotactic radiation trmt	7.92	2.21	2.74	2.21	2.74	0.41	10.54	11.07	10.54	11.07	XXX
77470		A	Special radiation treatment	2.09	1.79	9.34	NA	NA	0.70	4.58	12.13	NA	NA	XXX
77470	26	A	Special radiation treatment	2.09	0.58	0.65	0.58	0.65	0.11	2.78	2.85	2.78	2.85	XXX
77470	TC	A	Special radiation treatment	0.00	1.20	8.69	NA	NA	0.59	1.79	9.28	NA	NA	XXX
77600		R	Hyperthermia treatment	1.56	9.38	5.02	NA	NA	0.24	11.18	6.82	NA	NA	XXX
77600	26	R	Hyperthermia treatment	1.56	0.36	0.47	0.36	0.47	0.08	2.00	2.11	2.00	2.11	XXX
77600	TC	R	Hyperthermia treatment	0.00	9.02	4.55	NA	NA	0.16	9.18	4.71	NA	NA	XXX
77605		R	Hyperthermia treatment	2.09	16.95	7.79	NA	NA	0.38	19.42	10.26	NA	NA	XXX
77605	26	R	Hyperthermia treatment	2.09	0.53	0.63	0.53	0.63	0.16	2.78	2.88	2.78	2.88	XXX
77605	TC	R	Hyperthermia treatment	0.00	16.42	7.16	NA	NA	0.22	16.64	7.38	NA	NA	XXX
77610		R	Hyperthermia treatment	1.56	16.63	6.84	NA	NA	0.24	18.43	8.64	NA	NA	XXX
77610	26	R	Hyperthermia treatment	1.56	0.43	0.49	0.43	0.49	0.08	2.07	2.13	2.07	2.13	XXX
77610	TC	R	Hyperthermia treatment	0.00	16.20	6.35	NA	NA	0.16	16.36	6.51	NA	NA	XXX
77615		R	Hyperthermia treatment	2.09	24.67	9.72	NA	NA	0.33	27.09	12.14	NA	NA	XXX
77615	26	R	Hyperthermia treatment	2.09	0.56	0.64	0.56	0.64	0.11	2.76	2.84	2.76	2.84	XXX
77615	TC	R	Hyperthermia treatment	0.00	24.11	9.08	NA	NA	0.22	24.33	9.30	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
77620		R	Hyperthermia treatment	1.56	9.51	5.06	NA	NA	0.36	11.43	6.98	NA	NA	XXX
77620	26	R	Hyperthermia treatment	1.56	0.40	0.49	0.40	0.49	0.20	2.16	2.25	2.16	2.25	XXX
77620	TC	R	Hyperthermia treatment	0.00	9.11	4.57	NA	NA	0.16	9.27	4.73	NA	NA	XXX
77750		A	Infuse radioactive materials	4.90	4.26	3.25	NA	NA	0.32	9.48	8.47	NA	NA	090
77750	26	A	Infuse radioactive materials	4.90	1.38	1.53	1.38	1.53	0.25	6.53	6.68	6.53	6.68	090
77750	TC	A	Infuse radioactive materials	0.00	2.88	1.72	NA	NA	0.07	2.95	1.79	NA	NA	090
77761		A	Apply intrcav radiat simple	3.80	5.68	4.12	NA	NA	0.33	9.81	8.25	NA	NA	090
77761	26	A	Apply intrcav radiat simple	3.80	1.08	1.09	1.08	1.09	0.19	5.07	5.08	5.07	5.08	090
77761	TC	A	Apply intrcav radiat simple	0.00	4.60	3.03	NA	NA	0.14	4.74	3.17	NA	NA	090
77762		A	Apply intrcav radiat interm	5.71	6.67	5.76	NA	NA	0.48	12.86	11.95	NA	NA	090
77762	26	A	Apply intrcav radiat interm	5.71	1.59	1.78	1.59	1.78	0.29	7.59	7.78	7.59	7.78	090
77762	TC	A	Apply intrcav radiat interm	0.00	5.08	3.99	NA	NA	0.19	5.27	4.18	NA	NA	090
77763		A	Apply intrcav radiat compl	8.56	8.99	7.69	NA	NA	0.66	18.21	16.91	NA	NA	090
77763	26	A	Apply intrcav radiat compl	8.56	2.38	2.66	2.38	2.66	0.43	11.37	11.65	11.37	11.65	090
77763	TC	A	Apply intrcav radiat compl	0.00	6.61	5.03	NA	NA	0.23	6.84	5.26	NA	NA	090
77776		A	Apply interstit radiat simpl	4.65	6.77	4.05	NA	NA	0.57	11.99	9.27	NA	NA	090
77776	26	A	Apply interstit radiat simpl	4.65	1.58	1.11	1.58	1.11	0.44	6.67	6.20	6.67	6.20	090
77776	TC	A	Apply interstit radiat simpl	0.00	5.19	2.94	NA	NA	0.13	5.32	3.07	NA	NA	090
77777		A	Apply interstit radiat inter	7.47	7.07	6.73	NA	NA	0.61	15.15	14.81	NA	NA	090
77777	26	A	Apply interstit radiat inter	7.47	2.25	2.35	2.25	2.35	0.39	10.11	10.21	10.11	10.21	090
77778		A	Apply interstit radiat compl	11.17	9.77	8.98	NA	NA	0.84	21.78	20.99	NA	NA	090
77778	26	A	Apply interstit radiat compl	11.17	3.15	3.47	3.15	3.47	0.57	14.89	15.21	14.89	15.21	090
77778	TC	A	Apply interstit radiat compl	0.00	6.62	5.51	NA	NA	0.27	6.89	5.78	NA	NA	090
77781		A	High intensity brachytherapy	1.66	4.80	16.87	NA	NA	1.14	7.60	19.67	NA	NA	090
77781	26	A	High intensity brachytherapy	1.66	0.46	0.51	0.46	0.51	0.08	2.20	2.25	2.20	2.25	090
77781	TC	A	High intensity brachytherapy	0.00	4.34	16.36	NA	NA	1.06	5.40	17.42	NA	NA	090
77782		A	High intensity brachytherapy	2.49	12.68	19.04	NA	NA	1.19	16.36	22.72	NA	NA	090
77782	26	A	High intensity brachytherapy	2.49	0.69	0.77	0.69	0.77	0.13	3.31	3.39	3.31	3.39	090
77782	TC	A	High intensity brachytherapy	0.00	11.99	18.27	NA	NA	1.06	13.05	19.33	NA	NA	090
77783		A	High intensity brachytherapy	3.72	24.45	22.28	NA	NA	1.25	29.42	27.25	NA	NA	090
77783	26	A	High intensity brachytherapy	3.72	1.03	1.15	1.03	1.15	0.19	4.94	5.06	4.94	5.06	090
77783	TC	A	High intensity brachytherapy	0.00	23.42	21.13	NA	NA	1.06	24.48	22.19	NA	NA	090
77784		A	High intensity brachytherapy	5.60	45.62	28.03	NA	NA	1.35	52.57	34.98	NA	NA	090
77784	26	A	High intensity brachytherapy	5.60	1.55	1.74	1.55	1.74	0.29	7.44	7.63	7.44	7.63	090
77784	TC	A	High intensity brachytherapy	0.00	44.07	26.29	NA	NA	1.06	45.13	27.35	NA	NA	090
77789		A	Apply surface radiation	1.12	1.95	1.10	NA	NA	0.08	3.15	2.30	NA	NA	000
77789	26	A	Apply surface radiation	1.12	0.35	0.37	0.35	0.37	0.06	1.53	1.55	1.53	1.55	000
77789	TC	A	Apply surface radiation	0.00	1.60	0.74	NA	NA	0.02	1.62	0.76	NA	NA	000
77790		A	Radiation handling	1.05	1.18	0.93	NA	NA	0.07	2.30	2.05	NA	NA	XXX
77790	26	A	Radiation handling	1.05	0.30	0.33	0.30	0.33	0.05	1.40	1.43	1.40	1.43	XXX
77790	TC	A	Radiation handling	0.00	0.89	0.60	NA	NA	0.02	0.91	0.62	NA	NA	XXX
78000		A	Thyroid, single uptake	0.19	1.92	1.25	NA	NA	0.07	2.18	1.51	NA	NA	XXX
78000	26	A	Thyroid, single uptake	0.19	0.06	0.06	0.06	0.06	0.01	0.26	0.26	0.26	0.26	XXX
78000	TC	A	Thyroid, single uptake	0.00	1.86	1.19	NA	NA	0.06	1.92	1.25	NA	NA	XXX
78001		A	Thyroid, multiple uptakes	0.26	2.37	1.64	NA	NA	0.08	2.71	1.98	NA	NA	XXX
78001	26	A	Thyroid, multiple uptakes	0.26	0.09	0.09	0.09	0.09	0.01	0.36	0.36	0.36	0.36	XXX
78001	TC	A	Thyroid, multiple uptakes	0.00	2.28	1.55	NA	NA	0.07	2.35	1.62	NA	NA	XXX
78003		A	Thyroid suppress/stimul	0.33	1.99	1.31	NA	NA	0.07	2.39	1.71	NA	NA	XXX
78003	26	A	Thyroid suppress/stimul	0.33	0.11	0.11	0.11	0.11	0.01	0.45	0.45	0.45	0.45	XXX
78003	TC	A	Thyroid suppress/stimul	0.00	1.88	1.20	NA	NA	0.06	1.94	1.26	NA	NA	XXX
78006		A	Thyroid imaging with uptake	0.49	6.49	3.54	NA	NA	0.15	7.13	4.18	NA	NA	XXX
78006	26	A	Thyroid imaging with uptake	0.49	0.17	0.16	0.17	0.16	0.02	0.68	0.67	0.68	0.67	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
78006	TC	A	Thyroid imaging with uptake	0.00	6.32	3.37	NA	NA	0.13	6.45	3.50	NA	NA	XXX
78007		A	Thyroid image, mult uptakes	0.50	3.17	2.86	NA	NA	0.16	3.83	3.52	NA	NA	XXX
78007	26	A	Thyroid image, mult uptakes	0.50	0.17	0.17	0.17	0.17	0.02	0.69	0.69	0.69	0.69	XXX
78007	TC	A	Thyroid image, mult uptakes	0.00	2.99	2.68	NA	NA	0.14	3.13	2.82	NA	NA	XXX
78010		A	Thyroid imaging	0.39	4.36	2.56	NA	NA	0.13	4.88	3.08	NA	NA	XXX
78010	26	A	Thyroid imaging	0.39	0.13	0.13	0.13	0.13	0.02	0.54	0.54	0.54	0.54	XXX
78010	TC	A	Thyroid imaging	0.00	4.23	2.43	NA	NA	0.11	4.34	2.54	NA	NA	XXX
78011		A	Thyroid imaging with flow	0.45	4.69	3.10	NA	NA	0.15	5.29	3.70	NA	NA	XXX
78011	26	A	Thyroid imaging with flow	0.45	0.15	0.15	0.15	0.15	0.02	0.62	0.62	0.62	0.62	XXX
78011	TC	A	Thyroid imaging with flow	0.00	4.54	2.95	NA	NA	0.13	4.67	3.08	NA	NA	XXX
78015		A	Thyroid met imaging	0.67	5.61	3.51	NA	NA	0.17	6.45	4.35	NA	NA	XXX
78015	26	A	Thyroid met imaging	0.67	0.22	0.23	0.22	0.23	0.03	0.92	0.93	0.92	0.93	XXX
78015	TC	A	Thyroid met imaging	0.00	5.39	3.28	NA	NA	0.14	5.53	3.42	NA	NA	XXX
78016		A	Thyroid met imaging/studies	0.82	8.96	5.07	NA	NA	0.21	9.99	6.10	NA	NA	XXX
78016	26	A	Thyroid met imaging/studies	0.82	0.28	0.28	0.28	0.28	0.03	1.13	1.13	1.13	1.13	XXX
78016	TC	A	Thyroid met imaging/studies	0.00	8.68	4.79	NA	NA	0.18	8.86	4.97	NA	NA	XXX
78018		A	Thyroid met imaging, body	0.86	8.25	6.37	NA	NA	0.33	9.44	7.56	NA	NA	XXX
78018	26	A	Thyroid met imaging, body	0.86	0.29	0.30	0.29	0.30	0.04	1.19	1.20	1.19	1.20	XXX
78018	TC	A	Thyroid met imaging, body	0.00	7.96	6.07	NA	NA	0.29	8.25	6.36	NA	NA	XXX
78020		A	Thyroid met uptake	0.60	1.85	1.60	NA	NA	0.16	2.61	2.36	NA	NA	ZZZ
78020	26	A	Thyroid met uptake	0.60	0.20	0.21	0.20	0.21	0.02	0.82	0.83	0.82	0.83	ZZZ
78020	TC	A	Thyroid met uptake	0.00	1.65	1.40	NA	NA	0.14	1.79	1.54	NA	NA	ZZZ
78070		A	Parathyroid nuclear imaging	0.82	3.59	4.32	NA	NA	0.15	4.56	5.29	NA	NA	XXX
78070	26	A	Parathyroid nuclear imaging	0.82	0.28	0.28	0.28	0.28	0.04	1.14	1.14	1.14	1.14	XXX
78070	TC	A	Parathyroid nuclear imaging	0.00	3.31	4.04	NA	NA	0.11	3.42	4.15	NA	NA	XXX
78075		A	Adrenal nuclear imaging	0.74	11.98	7.27	NA	NA	0.32	13.04	8.33	NA	NA	XXX
78075	26	A	Adrenal nuclear imaging	0.74	0.25	0.26	0.25	0.26	0.03	1.02	1.03	1.02	1.03	XXX
78075	TC	A	Adrenal nuclear imaging	0.00	11.74	7.02	NA	NA	0.29	12.03	7.31	NA	NA	XXX
78102		A	Bone marrow imaging, ltd	0.55	4.33	2.76	NA	NA	0.14	5.02	3.45	NA	NA	XXX
78102	26	A	Bone marrow imaging, ltd	0.55	0.18	0.19	0.18	0.19	0.02	0.75	0.76	0.75	0.76	XXX
78102	TC	A	Bone marrow imaging, ltd	0.00	4.14	2.57	NA	NA	0.12	4.26	2.69	NA	NA	XXX
78103		A	Bone marrow imaging, mult	0.75	5.63	3.99	NA	NA	0.20	6.58	4.94	NA	NA	XXX
78103	26	A	Bone marrow imaging, mult	0.75	0.25	0.26	0.25	0.26	0.03	1.03	1.04	1.03	1.04	XXX
78103	TC	A	Bone marrow imaging, mult	0.00	5.38	3.73	NA	NA	0.17	5.55	3.90	NA	NA	XXX
78104		A	Bone marrow imaging, body	0.80	6.52	4.89	NA	NA	0.25	7.57	5.94	NA	NA	XXX
78104	26	A	Bone marrow imaging, body	0.80	0.29	0.28	0.29	0.28	0.03	1.12	1.11	1.12	1.11	XXX
78104	TC	A	Bone marrow imaging, body	0.00	6.22	4.62	NA	NA	0.22	6.44	4.84	NA	NA	XXX
78110		A	Plasma volume, single	0.19	2.19	1.31	NA	NA	0.07	2.45	1.57	NA	NA	XXX
78110	26	A	Plasma volume, single	0.19	0.06	0.07	0.06	0.07	0.01	0.26	0.27	0.26	0.27	XXX
78110	TC	A	Plasma volume, single	0.00	2.13	1.25	NA	NA	0.06	2.19	1.31	NA	NA	XXX
78111		A	Plasma volume, multiple	0.22	2.23	2.55	NA	NA	0.15	2.60	2.92	NA	NA	XXX
78111	26	A	Plasma volume, multiple	0.22	0.07	0.08	0.07	0.08	0.01	0.30	0.31	0.30	0.31	XXX
78111	TC	A	Plasma volume, multiple	0.00	2.16	2.48	NA	NA	0.14	2.30	2.62	NA	NA	XXX
78120		A	Red cell mass, single	0.23	2.16	1.91	NA	NA	0.12	2.51	2.26	NA	NA	XXX
78120	26	A	Red cell mass, single	0.23	0.08	0.08	0.08	0.08	0.01	0.32	0.32	0.32	0.32	XXX
78120	TC	A	Red cell mass, single	0.00	2.09	1.83	NA	NA	0.11	2.20	1.94	NA	NA	XXX
78121		A	Red cell mass, multiple	0.32	2.26	2.84	NA	NA	0.15	2.73	3.31	NA	NA	XXX
78121	26	A	Red cell mass, multiple	0.32	0.10	0.11	0.10	0.11	0.01	0.43	0.44	0.43	0.44	XXX
78121	TC	A	Red cell mass, multiple	0.00	2.16	2.73	NA	NA	0.14	2.30	2.87	NA	NA	XXX
78122		A	Blood volume	0.45	2.32	4.16	NA	NA	0.26	3.03	4.87	NA	NA	XXX
78122	26	A	Blood volume	0.45	0.15	0.16	0.15	0.16	0.02	0.62	0.63	0.62	0.63	XXX
78122	TC	A	Blood volume	0.00	2.17	4.00	NA	NA	0.24	2.41	4.24	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
78130		A	Red cell survival study	0.61	3.73	3.24	NA	NA	0.17	4.51	4.02	NA	NA	XXX
78130	26	A	Red cell survival study	0.61	0.22	0.21	0.22	0.21	0.03	0.86	0.85	0.86	0.85	XXX
78130	TC	A	Red cell survival study	0.00	3.52	3.03	NA	NA	0.14	3.66	3.17	NA	NA	XXX
78135		A	Red cell survival kinetics	0.64	8.87	6.04	NA	NA	0.28	9.79	6.96	NA	NA	XXX
78135	26	A	Red cell survival kinetics	0.64	0.21	0.22	0.21	0.22	0.03	0.88	0.89	0.88	0.89	XXX
78135	TC	A	Red cell survival kinetics	0.00	8.66	5.83	NA	NA	0.25	8.91	6.08	NA	NA	XXX
78140		A	Red cell sequestration	0.61	3.02	3.86	NA	NA	0.24	3.87	4.71	NA	NA	XXX
78140	26	A	Red cell sequestration	0.61	0.21	0.20	0.21	0.20	0.03	0.85	0.84	0.85	0.84	XXX
78140	TC	A	Red cell sequestration	0.00	2.81	3.66	NA	NA	0.21	3.02	3.87	NA	NA	XXX
78185		A	Spleen imaging	0.40	5.42	3.24	NA	NA	0.15	5.97	3.79	NA	NA	XXX
78185	26	A	Spleen imaging	0.40	0.14	0.14	0.14	0.14	0.02	0.56	0.56	0.56	0.56	XXX
78185	TC	A	Spleen imaging	0.00	5.29	3.10	NA	NA	0.13	5.42	3.23	NA	NA	XXX
78190		A	Platelet survival, kinetics	1.09	9.21	6.89	NA	NA	0.38	10.68	8.36	NA	NA	XXX
78190	26	A	Platelet survival, kinetics	1.09	0.35	0.38	0.35	0.38	0.08	1.52	1.55	1.52	1.55	XXX
78190	TC	A	Platelet survival, kinetics	0.00	8.85	6.51	NA	NA	0.30	9.15	6.81	NA	NA	XXX
78191		A	Platelet survival	0.61	3.62	6.58	NA	NA	0.40	4.63	7.59	NA	NA	XXX
78191	26	A	Platelet survival	0.61	0.21	0.20	0.21	0.20	0.03	0.85	0.84	0.85	0.84	XXX
78191	TC	A	Platelet survival	0.00	3.41	6.37	NA	NA	0.37	3.78	6.74	NA	NA	XXX
78195		A	Lymph system imaging	1.20	9.02	5.62	NA	NA	0.28	10.50	7.10	NA	NA	XXX
78195	26	A	Lymph system imaging	1.20	0.40	0.41	0.40	0.41	0.06	1.66	1.67	1.66	1.67	XXX
78195	TC	A	Lymph system imaging	0.00	8.62	5.22	NA	NA	0.22	8.84	5.44	NA	NA	XXX
78201		A	Liver imaging	0.44	4.94	3.13	NA	NA	0.15	5.53	3.72	NA	NA	XXX
78201	26	A	Liver imaging	0.44	0.15	0.15	0.15	0.15	0.02	0.61	0.61	0.61	0.61	XXX
78201	TC	A	Liver imaging	0.00	4.80	2.98	NA	NA	0.13	4.93	3.11	NA	NA	XXX
78202		A	Liver imaging with flow	0.51	5.50	3.67	NA	NA	0.16	6.17	4.34	NA	NA	XXX
78202	26	A	Liver imaging with flow	0.51	0.17	0.17	0.17	0.17	0.02	0.70	0.70	0.70	0.70	XXX
78202	TC	A	Liver imaging with flow	0.00	5.33	3.50	NA	NA	0.14	5.47	3.64	NA	NA	XXX
78205		A	Liver imaging (3D)	0.71	5.48	6.00	NA	NA	0.34	6.53	7.05	NA	NA	XXX
78205	26	A	Liver imaging (3D)	0.71	0.24	0.24	0.24	0.24	0.03	0.98	0.98	0.98	0.98	XXX
78205	TC	A	Liver imaging (3D)	0.00	5.23	5.76	NA	NA	0.31	5.54	6.07	NA	NA	XXX
78206		A	Liver image (3d) with flow	0.96	15.15	8.48	NA	NA	0.15	16.26	9.59	NA	NA	XXX
78206	26	A	Liver image (3d) with flow	0.96	0.33	0.33	0.33	0.33	0.04	1.33	1.33	1.33	1.33	XXX
78206	TC	A	Liver image (3d) with flow	0.00	14.82	8.15	NA	NA	0.11	14.93	8.26	NA	NA	XXX
78215		A	Liver and spleen imaging	0.49	5.02	3.59	NA	NA	0.16	5.67	4.24	NA	NA	XXX
78215	26	A	Liver and spleen imaging	0.49	0.17	0.16	0.17	0.16	0.02	0.68	0.67	0.68	0.67	XXX
78215	TC	A	Liver and spleen imaging	0.00	4.85	3.43	NA	NA	0.14	4.99	3.57	NA	NA	XXX
78216		A	Liver & spleen image/flow	0.57	2.94	3.50	NA	NA	0.20	3.71	4.27	NA	NA	XXX
78216	26	A	Liver & spleen image/flow	0.57	0.19	0.19	0.19	0.19	0.02	0.78	0.78	0.78	0.78	XXX
78216	TC	A	Liver & spleen image/flow	0.00	2.75	3.31	NA	NA	0.18	2.93	3.49	NA	NA	XXX
78220		A	Liver function study	0.49	3.19	3.72	NA	NA	0.21	3.89	4.42	NA	NA	XXX
78220	26	A	Liver function study	0.49	0.17	0.16	0.17	0.16	0.02	0.68	0.67	0.68	0.67	XXX
78220	TC	A	Liver function study	0.00	3.02	3.55	NA	NA	0.19	3.21	3.74	NA	NA	XXX
78223		A	Hepatobiliary imaging	0.84	8.87	5.18	NA	NA	0.23	9.94	6.25	NA	NA	XXX
78223	26	A	Hepatobiliary imaging	0.84	0.29	0.28	0.29	0.28	0.04	1.17	1.16	1.17	1.16	XXX
78223	TC	A	Hepatobiliary imaging	0.00	8.58	4.90	NA	NA	0.19	8.77	5.09	NA	NA	XXX
78230		A	Salivary gland imaging	0.45	4.31	2.83	NA	NA	0.15	4.91	3.43	NA	NA	XXX
78230	26	A	Salivary gland imaging	0.45	0.15	0.15	0.15	0.15	0.02	0.62	0.62	0.62	0.62	XXX
78230	TC	A	Salivary gland imaging	0.00	4.16	2.68	NA	NA	0.13	4.29	2.81	NA	NA	XXX
78231		A	Serial salivary imaging	0.52	2.89	3.24	NA	NA	0.19	3.60	3.95	NA	NA	XXX
78231	26	A	Serial salivary imaging	0.52	0.17	0.18	0.17	0.18	0.02	0.71	0.72	0.71	0.72	XXX
78231	TC	A	Serial salivary imaging	0.00	2.72	3.07	NA	NA	0.17	2.89	3.24	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
78232		A	Salivary gland function exam	0.47	2.86	3.50	NA	NA	0.20	3.53	4.17	NA	NA	XXX
78232	26	A	Salivary gland function exam	0.47	0.15	0.16	0.15	0.16	0.02	0.64	0.65	0.64	0.65	XXX
78232	TC	A	Salivary gland function exam	0.00	2.71	3.34	NA	NA	0.18	2.89	3.52	NA	NA	XXX
78258		A	Esophageal motility study	0.74	6.03	3.86	NA	NA	0.17	6.94	4.77	NA	NA	XXX
78258	26	A	Esophageal motility study	0.74	0.28	0.26	0.28	0.26	0.03	1.05	1.03	1.05	1.03	XXX
78258	TC	A	Esophageal motility study	0.00	5.74	3.60	NA	NA	0.14	5.88	3.74	NA	NA	XXX
78261		A	Gastric mucosa imaging	0.69	6.33	4.85	NA	NA	0.25	7.27	5.79	NA	NA	XXX
78261	26	A	Gastric mucosa imaging	0.69	0.24	0.24	0.24	0.24	0.03	0.96	0.96	0.96	0.96	XXX
78261	TC	A	Gastric mucosa imaging	0.00	6.09	4.61	NA	NA	0.22	6.31	4.83	NA	NA	XXX
78262		A	Gastroesophageal reflux exam	0.68	6.11	4.90	NA	NA	0.25	7.04	5.83	NA	NA	XXX
78262	26	A	Gastroesophageal reflux exam	0.68	0.21	0.23	0.21	0.23	0.03	0.92	0.94	0.92	0.94	XXX
78262	TC	A	Gastroesophageal reflux exam	0.00	5.89	4.67	NA	NA	0.22	6.11	4.89	NA	NA	XXX
78264		A	Gastric emptying study	0.78	7.47	5.17	NA	NA	0.25	8.50	6.20	NA	NA	XXX
78264	26	A	Gastric emptying study	0.78	0.27	0.26	0.27	0.26	0.03	1.08	1.07	1.08	1.07	XXX
78264	TC	A	Gastric emptying study	0.00	7.20	4.91	NA	NA	0.22	7.42	5.13	NA	NA	XXX
78270		A	Vit B-12 absorption exam	0.20	2.00	1.72	NA	NA	0.11	2.31	2.03	NA	NA	XXX
78270	26	A	Vit B-12 absorption exam	0.20	0.06	0.07	0.06	0.07	0.01	0.27	0.28	0.27	0.28	XXX
78270	TC	A	Vit B-12 absorption exam	0.00	1.94	1.65	NA	NA	0.10	2.04	1.75	NA	NA	XXX
78271		A	Vit b-12 absrp exam, int fac	0.20	1.94	1.77	NA	NA	0.11	2.25	2.08	NA	NA	XXX
78271	26	A	Vit b-12 absrp exam, int fac	0.20	0.05	0.07	0.05	0.07	0.01	0.26	0.28	0.26	0.28	XXX
78271	TC	A	Vit b-12 absrp exam, int fac	0.00	1.88	1.70	NA	NA	0.10	1.98	1.80	NA	NA	XXX
78272		A	Vit B-12 absorp, combined	0.27	2.04	2.33	NA	NA	0.14	2.45	2.74	NA	NA	XXX
78272	26	A	Vit B-12 absorp, combined	0.27	0.07	0.09	0.07	0.09	0.01	0.35	0.37	0.35	0.37	XXX
78272	TC	A	Vit B-12 absorp, combined	0.00	1.97	2.24	NA	NA	0.13	2.10	2.37	NA	NA	XXX
78278		A	Acute GI blood loss imaging	0.99	8.96	6.15	NA	NA	0.29	10.24	7.43	NA	NA	XXX
78278	26	A	Acute GI blood loss imaging	0.99	0.34	0.33	0.34	0.33	0.04	1.37	1.36	1.37	1.36	XXX
78278	TC	A	Acute GI blood loss imaging	0.00	8.62	5.82	NA	NA	0.25	8.87	6.07	NA	NA	XXX
78282	26	A	GI protein loss exam	0.38	0.13	0.13	0.13	0.13	0.02	0.53	0.53	0.53	0.53	XXX
78290		A	Meckells divert exam	0.68	8.85	4.68	NA	NA	0.19	9.72	5.55	NA	NA	XXX
78290	26	A	Meckells divert exam	0.68	0.23	0.23	0.23	0.23	0.03	0.94	0.94	0.94	0.94	XXX
78290	TC	A	Meckells divert exam	0.00	8.62	4.45	NA	NA	0.16	8.78	4.61	NA	NA	XXX
78291		A	Leveen/shunt patency exam	0.88	6.41	4.13	NA	NA	0.20	7.49	5.21	NA	NA	XXX
78291	26	A	Leveen/shunt patency exam	0.88	0.30	0.30	0.30	0.30	0.04	1.22	1.22	1.22	1.22	XXX
78291	TC	A	Leveen/shunt patency exam	0.00	6.12	3.83	NA	NA	0.16	6.28	3.99	NA	NA	XXX
78300		A	Bone imaging, limited area	0.62	4.39	3.12	NA	NA	0.17	5.18	3.91	NA	NA	XXX
78300	26	A	Bone imaging, limited area	0.62	0.21	0.21	0.21	0.21	0.03	0.86	0.86	0.86	0.86	XXX
78300	TC	A	Bone imaging, limited area	0.00	4.18	2.91	NA	NA	0.14	4.32	3.05	NA	NA	XXX
78305		A	Bone imaging, multiple areas	0.83	5.66	4.38	NA	NA	0.23	6.72	5.44	NA	NA	XXX
78305	26	A	Bone imaging, multiple areas	0.83	0.28	0.28	0.28	0.28	0.04	1.15	1.15	1.15	1.15	XXX
78305	TC	A	Bone imaging, multiple areas	0.00	5.39	4.10	NA	NA	0.19	5.58	4.29	NA	NA	XXX
78306		A	Bone imaging, whole body	0.86	6.32	5.01	NA	NA	0.26	7.44	6.13	NA	NA	XXX
78306	26	A	Bone imaging, whole body	0.86	0.30	0.29	0.30	0.29	0.04	1.20	1.19	1.20	1.19	XXX
78306	TC	A	Bone imaging, whole body	0.00	6.03	4.72	NA	NA	0.22	6.25	4.94	NA	NA	XXX
78315		A	Bone imaging, 3 phase	1.02	8.95	6.09	NA	NA	0.29	10.26	7.40	NA	NA	XXX
78315	26	A	Bone imaging, 3 phase	1.02	0.35	0.34	0.35	0.34	0.04	1.41	1.40	1.41	1.40	XXX
78315	TC	A	Bone imaging, 3 phase	0.00	8.60	5.74	NA	NA	0.25	8.85	5.99	NA	NA	XXX
78320		A	Bone imaging (3D)	1.04	5.57	6.11	NA	NA	0.35	6.96	7.50	NA	NA	XXX
78320	26	A	Bone imaging (3D)	1.04	0.35	0.36	0.35	0.36	0.04	1.43	1.44	1.43	1.44	XXX
78320	TC	A	Bone imaging (3D)	0.00	5.21	5.75	NA	NA	0.31	5.52	6.06	NA	NA	XXX
78350		A	Bone mineral, single photon	0.22	1.91	1.09	NA	NA	0.06	2.19	1.37	NA	NA	XXX
78350	26	A	Bone mineral, single photon	0.22	0.07	0.07	0.07	0.07	0.01	0.30	0.30	0.30	0.30	XXX
78350	TC	A	Bone mineral, single photon	0.00	1.84	1.02	NA	NA	0.05	1.89	1.07	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
78351		N	Bone mineral, dual photon	0.30	2.77	1.98	0.07	0.11	0.01	3.08	2.29	0.38	0.42	XXX
78414	26	A	Non-imaging heart function	0.45	0.14	0.16	0.14	0.16	0.02	0.61	0.63	0.61	0.63	XXX
78428		A	Cardiac shunt imaging	0.78	5.47	3.28	NA	NA	0.16	6.41	4.22	NA	NA	XXX
78428	26	A	Cardiac shunt imaging	0.78	0.39	0.32	0.39	0.32	0.03	1.20	1.13	1.20	1.13	XXX
78428	TC	A	Cardiac shunt imaging	0.00	5.08	2.97	NA	NA	0.13	5.21	3.10	NA	NA	XXX
78445		A	Vascular flow imaging	0.49	4.73	2.71	NA	NA	0.13	5.35	3.33	NA	NA	XXX
78445	26	A	Vascular flow imaging	0.49	0.19	0.18	0.19	0.18	0.02	0.70	0.69	0.70	0.69	XXX
78445	TC	A	Vascular flow imaging	0.00	4.55	2.54	NA	NA	0.11	4.66	2.65	NA	NA	XXX
78456		A	Acute venous thrombus image	1.00	10.25	5.81	NA	NA	0.33	11.58	7.14	NA	NA	XXX
78456	26	A	Acute venous thrombus image	1.00	0.52	0.39	0.52	0.39	0.04	1.56	1.43	1.56	1.43	XXX
78456	TC	A	Acute venous thrombus image	0.00	9.74	5.43	NA	NA	0.29	10.03	5.72	NA	NA	XXX
78457		A	Venous thrombosis imaging	0.77	4.86	3.41	NA	NA	0.17	5.80	4.35	NA	NA	XXX
78457	26	A	Venous thrombosis imaging	0.77	0.25	0.26	0.25	0.26	0.03	1.05	1.06	1.05	1.06	XXX
78458		A	Ven thrombosis images, bilat	0.90	4.71	4.44	NA	NA	0.25	5.86	5.59	NA	NA	XXX
78458	26	A	Ven thrombosis images, bilat	0.90	0.29	0.31	0.29	0.31	0.04	1.23	1.25	1.23	1.25	XXX
78458	TC	A	Ven thrombosis images, bilat	0.00	4.42	4.13	NA	NA	0.21	4.63	4.34	NA	NA	XXX
78459	26	A	Heart muscle imaging (PET)	1.50	0.58	0.57	0.58	0.57	0.05	2.13	2.12	2.13	2.12	XXX
78460		A	Heart muscle blood, single	0.86	4.86	3.21	NA	NA	0.17	5.89	4.24	NA	NA	XXX
78460	26	A	Heart muscle blood, single	0.86	0.31	0.30	0.31	0.30	0.04	1.21	1.20	1.21	1.20	XXX
78460	TC	A	Heart muscle blood, single	0.00	4.54	2.91	NA	NA	0.13	4.67	3.04	NA	NA	XXX
78461		A	Heart muscle blood, multiple	1.23	4.20	4.92	NA	NA	0.30	5.73	6.45	NA	NA	XXX
78461	26	A	Heart muscle blood, multiple	1.23	0.45	0.44	0.45	0.44	0.05	1.73	1.72	1.73	1.72	XXX
78461	TC	A	Heart muscle blood, multiple	0.00	3.75	4.49	NA	NA	0.25	4.00	4.74	NA	NA	XXX
78464		A	Heart image (3d), single	1.09	6.05	7.12	NA	NA	0.41	7.55	8.62	NA	NA	XXX
78464	26	A	Heart image (3d), single	1.09	0.51	0.41	0.51	0.41	0.04	1.64	1.54	1.64	1.54	XXX
78464	TC	A	Heart image (3d), single	0.00	5.54	6.70	NA	NA	0.37	5.91	7.07	NA	NA	XXX
78465		A	Heart image (3d), multiple	1.46	11.81	12.21	NA	NA	0.67	13.94	14.34	NA	NA	XXX
78465	26	A	Heart image (3d), multiple	1.46	0.73	0.57	0.73	0.57	0.05	2.24	2.08	2.24	2.08	XXX
78465	TC	A	Heart image (3d), multiple	0.00	11.08	11.64	NA	NA	0.62	11.70	12.26	NA	NA	XXX
78466		A	Heart infarct image	0.69	4.66	3.32	NA	NA	0.17	5.52	4.18	NA	NA	XXX
78466	26	A	Heart infarct image	0.69	0.27	0.25	0.27	0.25	0.03	0.99	0.97	0.99	0.97	XXX
78466	TC	A	Heart infarct image	0.00	4.39	3.07	NA	NA	0.14	4.53	3.21	NA	NA	XXX
78468		A	Heart infarct image (ef)	0.80	6.19	4.50	NA	NA	0.22	7.21	5.52	NA	NA	XXX
78468	26	A	Heart infarct image (ef)	0.80	0.43	0.31	0.43	0.31	0.03	1.26	1.14	1.26	1.14	XXX
78468	TC	A	Heart infarct image (ef)	0.00	5.76	4.19	NA	NA	0.19	5.95	4.38	NA	NA	XXX
78469		A	Heart infarct image (3D)	0.92	6.39	5.76	NA	NA	0.31	7.62	6.99	NA	NA	XXX
78469	26	A	Heart infarct image (3D)	0.92	0.44	0.34	0.44	0.34	0.03	1.39	1.29	1.39	1.29	XXX
78469	TC	A	Heart infarct image (3D)	0.00	5.95	5.42	NA	NA	0.28	6.23	5.70	NA	NA	XXX
78472		A	Gated heart, planar, single	0.98	5.20	5.70	NA	NA	0.34	6.52	7.02	NA	NA	XXX
78472	26	A	Gated heart, planar, single	0.98	0.42	0.36	0.42	0.36	0.04	1.44	1.38	1.44	1.38	XXX
78472	TC	A	Gated heart, planar, single	0.00	4.77	5.34	NA	NA	0.30	5.07	5.64	NA	NA	XXX
78473		A	Gated heart, multiple	1.47	9.63	9.00	NA	NA	0.48	11.58	10.95	NA	NA	XXX
78473	26	A	Gated heart, multiple	1.47	0.65	0.55	0.65	0.55	0.06	2.18	2.08	2.18	2.08	XXX
78473	TC	A	Gated heart, multiple	0.00	8.99	8.46	NA	NA	0.42	9.41	8.88	NA	NA	XXX
78478		A	Heart wall motion add-on	0.50	0.83	1.55	NA	NA	0.12	1.45	2.17	NA	NA	XXX
78478	26	A	Heart wall motion add-on	0.50	0.25	0.24	0.25	0.24	0.02	0.77	0.76	0.77	0.76	XXX
78478	TC	A	Heart wall motion add-on	0.00	0.58	1.32	NA	NA	0.10	0.68	1.42	NA	NA	XXX
78480		A	Heart function add-on	0.30	0.73	1.52	NA	NA	0.12	1.15	1.94	NA	NA	XXX
78480	26	A	Heart function add-on	0.30	0.15	0.20	0.15	0.20	0.02	0.47	0.52	0.47	0.52	XXX
78480	TC	A	Heart function add-on	0.00	0.58	1.32	NA	NA	0.10	0.68	1.42	NA	NA	XXX
78481		A	Heart first pass, single	0.98	1.30	4.53	NA	NA	0.31	2.59	5.82	NA	NA	XXX
78481	26	A	Heart first pass, single	0.98	0.51	0.40	0.51	0.40	0.03	1.52	1.41	1.52	1.41	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
78481	TC	A	Heart first pass, single	0.00	0.79	4.13	NA	NA	0.28	1.07	4.41	NA	NA	XXX
78483		A	Heart first pass, multiple	1.47	7.41	8.18	NA	NA	0.46	9.34	10.11	NA	NA	XXX
78483	26	A	Heart first pass, multiple	1.47	0.81	0.61	0.81	0.61	0.05	2.33	2.13	2.33	2.13	XXX
78483	TC	A	Heart first pass, multiple	0.00	6.61	7.57	NA	NA	0.41	7.02	7.98	NA	NA	XXX
78491	26	A	Heart image (pet), single	1.50	0.65	0.61	0.65	0.61	0.06	2.21	2.17	2.21	2.17	XXX
78492	26	A	Heart image (pet), multiple	1.87	0.93	0.79	0.93	0.79	0.07	2.87	2.73	2.87	2.73	XXX
78494		A	Heart image, spect	1.19	6.42	7.24	NA	NA	0.35	7.96	8.78	NA	NA	XXX
78494	26	A	Heart image, spect	1.19	0.56	0.46	0.56	0.46	0.05	1.80	1.70	1.80	1.70	XXX
78494	TC	A	Heart image, spect	0.00	5.86	6.78	NA	NA	0.30	6.16	7.08	NA	NA	XXX
78496		A	Heart first pass add-on	0.50	0.95	5.69	NA	NA	0.32	1.77	6.51	NA	NA	ZZZ
78496	26	A	Heart first pass add-on	0.50	0.25	0.20	0.25	0.20	0.02	0.77	0.72	0.77	0.72	ZZZ
78496	TC	A	Heart first pass add-on	0.00	0.69	5.49	NA	NA	0.30	0.99	5.79	NA	NA	ZZZ
78580		A	Lung perfusion imaging	0.74	5.33	4.10	NA	NA	0.21	6.28	5.05	NA	NA	XXX
78580	26	A	Lung perfusion imaging	0.74	0.26	0.25	0.26	0.25	0.03	1.03	1.02	1.03	1.02	XXX
78580	TC	A	Lung perfusion imaging	0.00	5.07	3.85	NA	NA	0.18	5.25	4.03	NA	NA	XXX
78584		A	Lung V/Q image single breath	0.99	3.10	3.43	NA	NA	0.21	4.30	4.63	NA	NA	XXX
78584	26	A	Lung V/Q image single breath	0.99	0.34	0.33	0.34	0.33	0.04	1.37	1.36	1.37	1.36	XXX
78584	TC	A	Lung V/Q image single breath	0.00	2.76	3.10	NA	NA	0.17	2.93	3.27	NA	NA	XXX
78585		A	Lung V/Q imaging	1.09	8.99	6.76	NA	NA	0.35	10.43	8.20	NA	NA	XXX
78585	26	A	Lung V/Q imaging	1.09	0.37	0.36	0.37	0.36	0.05	1.51	1.50	1.51	1.50	XXX
78585	TC	A	Lung V/Q imaging	0.00	8.61	6.40	NA	NA	0.30	8.91	6.70	NA	NA	XXX
78586		A	Aerosol lung image, single	0.40	4.33	3.13	NA	NA	0.16	4.89	3.69	NA	NA	XXX
78586	26	A	Aerosol lung image, single	0.40	0.14	0.13	0.14	0.13	0.02	0.56	0.55	0.56	0.55	XXX
78586	TC	A	Aerosol lung image, single	0.00	4.19	3.00	NA	NA	0.14	4.33	3.14	NA	NA	XXX
78587		A	Aerosol lung image, multiple	0.49	5.64	3.65	NA	NA	0.16	6.29	4.30	NA	NA	XXX
78587	26	A	Aerosol lung image, multiple	0.49	0.17	0.17	0.17	0.17	0.02	0.68	0.68	0.68	0.68	XXX
78587	TC	A	Aerosol lung image, multiple	0.00	5.47	3.48	NA	NA	0.14	5.61	3.62	NA	NA	XXX
78588		A	Perfusion lung image	1.09	9.02	4.93	NA	NA	0.23	10.34	6.25	NA	NA	XXX
78588	26	A	Perfusion lung image	1.09	0.37	0.36	0.37	0.36	0.05	1.51	1.50	1.51	1.50	XXX
78588	TC	A	Perfusion lung image	0.00	8.64	4.57	NA	NA	0.18	8.82	4.75	NA	NA	XXX
78591		A	Vent image, 1 breath, 1 proj	0.40	4.33	3.33	NA	NA	0.16	4.89	3.89	NA	NA	XXX
78591	26	A	Vent image, 1 breath, 1 proj	0.40	0.14	0.13	0.14	0.13	0.02	0.56	0.55	0.56	0.55	XXX
78591	TC	A	Vent image, 1 breath, 1 proj	0.00	4.19	3.19	NA	NA	0.14	4.33	3.33	NA	NA	XXX
78593		A	Vent image, 1 proj, gas	0.49	5.01	3.97	NA	NA	0.20	5.70	4.66	NA	NA	XXX
78593	26	A	Vent image, 1 proj, gas	0.49	0.17	0.16	0.17	0.16	0.02	0.68	0.67	0.68	0.67	XXX
78593	TC	A	Vent image, 1 proj, gas	0.00	4.84	3.81	NA	NA	0.18	5.02	3.99	NA	NA	XXX
78594		A	Vent image, mult proj, gas	0.53	5.48	5.25	NA	NA	0.27	6.28	6.05	NA	NA	XXX
78594	26	A	Vent image, mult proj, gas	0.53	0.17	0.18	0.17	0.18	0.02	0.72	0.73	0.72	0.73	XXX
78594	TC	A	Vent image, mult proj, gas	0.00	5.31	5.07	NA	NA	0.25	5.56	5.32	NA	NA	XXX
78596		A	Lung differential function	1.27	8.98	7.88	NA	NA	0.42	10.67	9.57	NA	NA	XXX
78596	26	A	Lung differential function	1.27	0.39	0.41	0.39	0.41	0.05	1.71	1.73	1.71	1.73	XXX
78596	TC	A	Lung differential function	0.00	8.59	7.47	NA	NA	0.37	8.96	7.84	NA	NA	XXX
78600		A	Brain imaging, ltd static	0.44	7.54	4.17	NA	NA	0.16	8.14	4.77	NA	NA	XXX
78600	26	A	Brain imaging, ltd static	0.44	0.15	0.15	0.15	0.15	0.02	0.61	0.61	0.61	0.61	XXX
78600	TC	A	Brain imaging, ltd static	0.00	7.39	4.02	NA	NA	0.14	7.53	4.16	NA	NA	XXX
78601		A	Brain imaging, ltd w/flow	0.51	5.58	4.08	NA	NA	0.20	6.29	4.79	NA	NA	XXX
78601	26	A	Brain imaging, ltd w/flow	0.51	0.17	0.17	0.17	0.17	0.02	0.70	0.70	0.70	0.70	XXX
78601	TC	A	Brain imaging, ltd w/flow	0.00	5.40	3.91	NA	NA	0.18	5.58	4.09	NA	NA	XXX
78605		A	Brain imaging, complete	0.53	4.96	3.93	NA	NA	0.20	5.69	4.66	NA	NA	XXX
78605	26	A	Brain imaging, complete	0.53	0.18	0.18	0.18	0.18	0.02	0.73	0.73	0.73	0.73	XXX
78605	TC	A	Brain imaging, complete	0.00	4.78	3.75	NA	NA	0.18	4.96	3.93	NA	NA	XXX
78606		A	Brain imaging, compl w/flow	0.64	8.89	5.29	NA	NA	0.24	9.77	6.17	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
78606	26	A	Brain imaging, compl w/flow	0.64	0.22	0.21	0.22	0.21	0.03	0.89	0.88	0.89	0.88	XXX
78606	TC	A	Brain imaging, compl w/flow	0.00	8.67	5.08	NA	NA	0.21	8.88	5.29	NA	NA	XXX
78607		A	Brain imaging (3D)	1.23	15.67	9.17	NA	NA	0.40	17.30	10.80	NA	NA	XXX
78607	26	A	Brain imaging (3D)	1.23	0.41	0.43	0.41	0.43	0.05	1.69	1.71	1.69	1.71	XXX
78607	TC	A	Brain imaging (3D)	0.00	15.26	8.74	NA	NA	0.35	15.61	9.09	NA	NA	XXX
78608	26	A	Brain imaging (PET)	1.50	0.50	0.51	0.50	0.51	0.06	2.06	2.07	2.06	2.07	XXX
78609	26	A	Brain imaging (PET)	1.50	0.52	0.51	0.52	0.51	0.06	2.08	2.07	2.08	2.07	XXX
78610		A	Brain flow imaging only	0.30	4.62	2.42	NA	NA	0.11	5.03	2.83	NA	NA	XXX
78610	26	A	Brain flow imaging only	0.30	0.10	0.11	0.10	0.11	0.01	0.41	0.42	0.41	0.42	XXX
78610	TC	A	Brain flow imaging only	0.00	4.52	2.32	NA	NA	0.10	4.62	2.42	NA	NA	XXX
78615		A	Cerebral vascular flow image	0.42	5.53	4.39	NA	NA	0.23	6.18	5.04	NA	NA	XXX
78615	26	A	Cerebral vascular flow image	0.42	0.14	0.15	0.14	0.15	0.02	0.58	0.59	0.58	0.59	XXX
78615	TC	A	Cerebral vascular flow image	0.00	5.39	4.24	NA	NA	0.21	5.60	4.45	NA	NA	XXX
78630		A	Cerebrospinal fluid scan	0.68	8.99	6.21	NA	NA	0.30	9.97	7.19	NA	NA	XXX
78630	26	A	Cerebrospinal fluid scan	0.68	0.23	0.23	0.23	0.23	0.03	0.94	0.94	0.94	0.94	XXX
78630	TC	A	Cerebrospinal fluid scan	0.00	8.76	5.98	NA	NA	0.27	9.03	6.25	NA	NA	XXX
78635		A	CSF ventriculography	0.61	8.91	4.31	NA	NA	0.16	9.68	5.08	NA	NA	XXX
78635	26	A	CSF ventriculography	0.61	0.21	0.23	0.21	0.23	0.02	0.84	0.86	0.84	0.86	XXX
78635	TC	A	CSF ventriculography	0.00	8.70	4.09	NA	NA	0.14	8.84	4.23	NA	NA	XXX
78645		A	CSF shunt evaluation	0.57	8.80	4.92	NA	NA	0.20	9.57	5.69	NA	NA	XXX
78645	26	A	CSF shunt evaluation	0.57	0.19	0.19	0.19	0.19	0.02	0.78	0.78	0.78	0.78	XXX
78645	TC	A	CSF shunt evaluation	0.00	8.61	4.73	NA	NA	0.18	8.79	4.91	NA	NA	XXX
78647		A	Cerebrospinal fluid scan	0.90	14.68	8.35	NA	NA	0.35	15.93	9.60	NA	NA	XXX
78647	26	A	Cerebrospinal fluid scan	0.90	0.28	0.30	0.28	0.30	0.04	1.22	1.24	1.22	1.24	XXX
78647	TC	A	Cerebrospinal fluid scan	0.00	14.40	8.05	NA	NA	0.31	14.71	8.36	NA	NA	XXX
78650		A	CSF leakage imaging	0.61	8.97	5.89	NA	NA	0.27	9.85	6.77	NA	NA	XXX
78650	26	A	CSF leakage imaging	0.61	0.21	0.21	0.21	0.21	0.03	0.85	0.85	0.85	0.85	XXX
78650	TC	A	CSF leakage imaging	0.00	8.76	5.68	NA	NA	0.24	9.00	5.92	NA	NA	XXX
78660		A	Nuclear exam of tear flow	0.53	4.40	2.83	NA	NA	0.14	5.07	3.50	NA	NA	XXX
78660	26	A	Nuclear exam of tear flow	0.53	0.18	0.18	0.18	0.18	0.02	0.73	0.73	0.73	0.73	XXX
78660	TC	A	Nuclear exam of tear flow	0.00	4.22	2.65	NA	NA	0.12	4.34	2.77	NA	NA	XXX
78700		A	Kidney imaging, static	0.45	4.63	3.57	NA	NA	0.18	5.26	4.20	NA	NA	XXX
78700	26	A	Kidney imaging, static	0.45	0.16	0.15	0.16	0.15	0.02	0.63	0.62	0.63	0.62	XXX
78700	TC	A	Kidney imaging, static	0.00	4.47	3.41	NA	NA	0.16	4.63	3.57	NA	NA	XXX
78701		A	Kidney imaging with flow	0.49	5.60	4.20	NA	NA	0.20	6.29	4.89	NA	NA	XXX
78701	26	A	Kidney imaging with flow	0.49	0.17	0.16	0.17	0.16	0.02	0.68	0.67	0.68	0.67	XXX
78701	TC	A	Kidney imaging with flow	0.00	5.43	4.04	NA	NA	0.18	5.61	4.22	NA	NA	XXX
78704		A	Imaging renogram	0.74	5.67	4.58	NA	NA	0.24	6.65	5.56	NA	NA	XXX
78704	26	A	Imaging renogram	0.74	0.25	0.25	0.25	0.25	0.03	1.02	1.02	1.02	1.02	XXX
78704	TC	A	Imaging renogram	0.00	5.41	4.32	NA	NA	0.21	5.62	4.53	NA	NA	XXX
78707		A	Kidney flow/function image	0.96	5.71	5.03	NA	NA	0.27	6.94	6.26	NA	NA	XXX
78707	26	A	Kidney flow/function image	0.96	0.33	0.32	0.33	0.32	0.04	1.33	1.32	1.33	1.32	XXX
78707	TC	A	Kidney flow/function image	0.00	5.38	4.71	NA	NA	0.23	5.61	4.94	NA	NA	XXX
78708		A	Kidney flow/function image	1.21	3.59	4.57	NA	NA	0.28	5.08	6.06	NA	NA	XXX
78708	26	A	Kidney flow/function image	1.21	0.42	0.41	0.42	0.41	0.05	1.68	1.67	1.68	1.67	XXX
78708	TC	A	Kidney flow/function image	0.00	3.17	4.15	NA	NA	0.23	3.40	4.38	NA	NA	XXX
78709		A	Kidney flow/function image	1.41	9.25	6.03	NA	NA	0.29	10.95	7.73	NA	NA	XXX
78709	26	A	Kidney flow/function image	1.41	0.48	0.47	0.48	0.47	0.06	1.95	1.94	1.95	1.94	XXX
78709	TC	A	Kidney flow/function image	0.00	8.76	5.55	NA	NA	0.23	8.99	5.78	NA	NA	XXX
78710		A	Kidney imaging (3D)	0.66	5.48	5.98	NA	NA	0.34	6.48	6.98	NA	NA	XXX
78710	26	A	Kidney imaging (3D)	0.66	0.22	0.22	0.22	0.22	0.03	0.91	0.91	0.91	0.91	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
78710	TC	A	Kidney imaging (3D)	0.00	5.26	5.76	NA	NA	0.31	5.57	6.07	NA	NA	XXX
78715		A	Renal vascular flow exam	0.30	97	2.51	NA	NA	0.11	5.38	2.92	NA	NA	XXX
78715	26	A	Renal vascular flow exam	0.30	0.13	0.12	0.13	0.12	0.01	0.44	0.43	0.44	0.43	XXX
78715	TC	A	Renal vascular flow exam	0.00	4.84	2.40	NA	NA	0.10	4.94	2.50	NA	NA	XXX
78725		A	Kidney function study	0.38	2.44	2.05	NA	NA	0.13	2.95	2.56	NA	NA	XXX
78725	26	A	Kidney function study	0.38	0.12	0.13	0.12	0.13	0.02	0.52	0.53	0.52	0.53	XXX
78725	TC	A	Kidney function study	0.00	2.32	1.92	NA	NA	0.11	2.43	2.03	NA	NA	XXX
78730		A	Urinary bladder retention	0.36	5.70	2.61	NA	NA	0.10	6.16	3.07	NA	NA	XXX
78730	26	A	Urinary bladder retention	0.36	0.15	0.13	0.15	0.13	0.02	0.53	0.51	0.53	0.51	XXX
78730	TC	A	Urinary bladder retention	0.00	5.55	2.48	NA	NA	0.08	5.63	2.56	NA	NA	XXX
78740		A	Ureteral reflux study	0.57	5.64	3.15	NA	NA	0.15	6.36	3.87	NA	NA	XXX
78740	26	A	Ureteral reflux study	0.57	0.19	0.19	0.19	0.19	0.03	0.79	0.79	0.79	0.79	XXX
78740	TC	A	Ureteral reflux study	0.00	5.45	2.96	NA	NA	0.12	5.57	3.08	NA	NA	XXX
78760		A	Testicular imaging	0.66	4.68	3.35	NA	NA	0.17	5.51	4.18	NA	NA	XXX
78760	26	A	Testicular imaging	0.66	0.23	0.22	0.23	0.22	0.03	0.92	0.91	0.92	0.91	XXX
78760	TC	A	Testicular imaging	0.00	4.44	3.13	NA	NA	0.14	4.58	3.27	NA	NA	XXX
78761		A	Testicular imaging/flow	0.71	5.10	3.86	NA	NA	0.20	6.01	4.77	NA	NA	XXX
78761	26	A	Testicular imaging/flow	0.71	0.25	0.24	0.25	0.24	0.03	0.99	0.98	0.99	0.98	XXX
78761	TC	A	Testicular imaging/flow	0.00	4.85	3.62	NA	NA	0.17	5.02	3.79	NA	NA	XXX
78800		A	Tumor imaging, limited area	0.66	4.44	3.83	NA	NA	0.22	5.32	4.71	NA	NA	XXX
78800	26	A	Tumor imaging, limited area	0.66	0.21	0.22	0.21	0.22	0.04	0.91	0.92	0.91	0.92	XXX
78800	TC	A	Tumor imaging, limited area	0.00	4.23	3.62	NA	NA	0.18	4.41	3.80	NA	NA	XXX
78801		A	Tumor imaging, mult areas	0.79	6.33	4.96	NA	NA	0.27	7.39	6.02	NA	NA	XXX
78801	26	A	Tumor imaging, mult areas	0.79	0.26	0.27	0.26	0.27	0.05	1.10	1.11	1.10	1.11	XXX
78801	TC	A	Tumor imaging, mult areas	0.00	6.07	4.69	NA	NA	0.22	6.29	4.91	NA	NA	XXX
78802		A	Tumor imaging, whole body	0.86	8.48	6.50	NA	NA	0.34	9.68	7.70	NA	NA	XXX
78802	26	A	Tumor imaging, whole body	0.86	0.29	0.29	0.29	0.29	0.04	1.19	1.19	1.19	1.19	XXX
78802	TC	A	Tumor imaging, whole body	0.00	8.19	6.21	NA	NA	0.30	8.49	6.51	NA	NA	XXX
78803		A	Tumor imaging (3D)	1.09	15.50	9.09	NA	NA	0.40	16.99	10.58	NA	NA	XXX
78803	26	A	Tumor imaging (3D)	1.09	0.37	0.38	0.37	0.38	0.05	1.51	1.52	1.51	1.52	XXX
78803	TC	A	Tumor imaging (3D)	0.00	15.14	8.71	NA	NA	0.35	15.49	9.06	NA	NA	XXX
78804		A	Tumor imaging, whole body	1.07	15.48	12.47	NA	NA	0.34	16.89	13.88	NA	NA	XXX
78804	26	A	Tumor imaging, whole body	1.07	0.36	0.37	0.36	0.37	0.04	1.47	1.48	1.47	1.48	XXX
78804	TC	A	Tumor imaging, whole body	0.00	15.12	12.10	NA	NA	0.30	15.42	12.40	NA	NA	XXX
78805		A	Abscess imaging, ltd area	0.73	4.38	3.84	NA	NA	0.21	5.32	4.78	NA	NA	XXX
78805	26	A	Abscess imaging, ltd area	0.73	0.25	0.25	0.25	0.25	0.03	1.01	1.01	1.01	1.01	XXX
78805	TC	A	Abscess imaging, ltd area	0.00	4.14	3.59	NA	NA	0.18	4.32	3.77	NA	NA	XXX
78806		A	Abscess imaging, whole body	0.86	8.70	7.23	NA	NA	0.39	9.95	8.48	NA	NA	XXX
78806	26	A	Abscess imaging, whole body	0.86	0.29	0.29	0.29	0.29	0.04	1.19	1.19	1.19	1.19	XXX
78806	TC	A	Abscess imaging, whole body	0.00	8.41	6.94	NA	NA	0.35	8.76	7.29	NA	NA	XXX
78807		A	Nuclear localization/abscess	1.09	14.72	8.90	NA	NA	0.39	16.20	10.38	NA	NA	XXX
78807	26	A	Nuclear localization/abscess	1.09	0.36	0.38	0.36	0.38	0.04	1.49	1.51	1.49	1.51	XXX
78807	TC	A	Nuclear localization/abscess	0.00	14.36	8.52	NA	NA	0.35	14.71	8.87	NA	NA	XXX
78811	26	A	Tumor imaging (pet), limited	1.54	0.53	0.53	0.53	0.53	0.11	2.18	2.18	2.18	2.18	XXX
78812	26	A	Tumor image (pet)/skul-thigh	1.93	0.66	0.66	0.66	0.66	0.11	2.70	2.70	2.70	2.70	XXX
78813	26	A	Tumor image (pet) full body	2.00	0.69	0.69	0.69	0.69	0.11	2.80	2.80	2.80	2.80	XXX
78814	26	A	Tumor image pet/ct, limited	2.20	0.74	0.76	0.74	0.76	0.11	3.05	3.07	3.05	3.07	XXX
78815	26	A	Tumorimage pet/ct skul-thigh	2.44	0.83	0.84	0.83	0.84	0.11	3.38	3.39	3.38	3.39	XXX
78816	26	A	Tumor image pet/ct full body	2.50	0.85	0.86	0.85	0.86	0.11	3.46	3.47	3.46	3.47	XXX
78890		B	Nuclear medicine data proc	0.05	0.39	1.10	NA	NA	0.07	0.51	1.22	NA	NA	XXX
78890	26	B	Nuclear medicine data proc	0.05	0.01	0.02	0.01	0.02	0.01	0.07	0.08	0.07	0.08	XXX
78890	TC	B	Nuclear medicine data proc	0.00	0.38	1.08	NA	NA	0.06	0.44	1.14	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
78891		B	Nuclear med data proc	0.10	0.88	2.22	NA	NA	0.14	1.12	2.46	NA	NA	XXX
78891	26	B	Nuclear med data proc	0.10	0.02	0.04	0.02	0.04	0.01	0.13	0.15	0.13	0.15	XXX
78891	TC	B	Nuclear med data proc	0.00	0.85	2.19	NA	NA	0.13	0.98	2.32	NA	NA	XXX
79005		A	Nuclear rx, oral admin	1.80	1.85	2.89	NA	NA	0.22	3.87	4.91	NA	NA	XXX
79005	26	A	Nuclear rx, oral admin	1.80	0.56	0.59	0.56	0.59	0.08	2.44	2.47	2.44	2.47	XXX
79005	TC	A	Nuclear rx, oral admin	0.00	1.29	2.30	NA	NA	0.14	1.43	2.44	NA	NA	XXX
79101		A	Nuclear rx, iv admin	1.96	2.14	3.01	NA	NA	0.22	4.32	5.19	NA	NA	XXX
79101	26	A	Nuclear rx, iv admin	1.96	0.70	0.68	0.70	0.68	0.08	2.74	2.72	2.74	2.72	XXX
79101	TC	A	Nuclear rx, iv admin	0.00	1.44	2.33	NA	NA	0.14	1.58	2.47	NA	NA	XXX
79200		A	Nuclear rx, intracav admin	1.99	2.25	3.05	NA	NA	0.23	4.47	5.27	NA	NA	XXX
79200	26	A	Nuclear rx, intracav admin	1.99	0.61	0.67	0.61	0.67	0.09	2.69	2.75	2.69	2.75	XXX
79200	TC	A	Nuclear rx, intracav admin	0.00	1.64	2.38	NA	NA	0.14	1.78	2.52	NA	NA	XXX
79300	26	A	Nuclr rx, interstit colloid	1.60	0.50	0.55	0.50	0.55	0.13	2.23	2.28	2.23	2.28	XXX
79403		A	Hematopoietic nuclear tx	2.25	2.92	4.61	NA	NA	0.24	5.41	7.10	NA	NA	XXX
79403	26	A	Hematopoietic nuclear tx	2.25	0.71	0.85	0.71	0.85	0.10	3.06	3.20	3.06	3.20	XXX
79403	TC	A	Hematopoietic nuclear tx	0.00	2.21	3.76	NA	NA	0.14	2.35	3.90	NA	NA	XXX
79440		A	Nuclear rx, intra-articular	1.99	1.90	2.99	NA	NA	0.22	4.11	5.20	NA	NA	XXX
79440	26	A	Nuclear rx, intra-articular	1.99	0.68	0.71	0.68	0.71	0.08	2.75	2.78	2.75	2.78	XXX
79440	TC	A	Nuclear rx, intra-articular	0.00	1.22	2.28	NA	NA	0.14	1.36	2.42	NA	NA	XXX
79445	26	A	Nuclear rx, intra-arterial	2.40	0.83	0.82	0.83	0.82	0.12	3.35	3.34	3.35	3.34	XXX
80500		A	Lab pathology consultation	0.37	0.19	0.21	0.11	0.15	0.01	0.57	0.59	0.49	0.53	XXX
80502		A	Lab pathology consultation	1.33	0.29	0.48	0.24	0.47	0.04	1.66	1.85	1.61	1.84	XXX
83020	26	A	Hemoglobin electrophoresis	0.37	0.11	0.14	0.11	0.14	0.01	0.49	0.52	0.49	0.52	XXX
83912	26	A	Genetic examination	0.37	0.11	0.12	0.11	0.12	0.01	0.49	0.50	0.49	0.50	XXX
84165	26	A	Protein e-phoresis, serum	0.37	0.11	0.13	0.11	0.13	0.01	0.49	0.51	0.49	0.51	XXX
84166	26	A	Protein e-phoresis/urine/csf	0.37	0.11	0.13	0.11	0.13	0.01	0.49	0.51	0.49	0.51	XXX
84181	26	A	Western blot test	0.37	0.11	0.13	0.11	0.13	0.01	0.49	0.51	0.49	0.51	XXX
84182	26	A	Protein, western blot test	0.37	0.11	0.15	0.11	0.15	0.02	0.50	0.54	0.50	0.54	XXX
85060		A	Blood smear interpretation	0.45	0.14	0.17	0.14	0.17	0.02	0.61	0.64	0.61	0.64	XXX
85097		A	Bone marrow interpretation	0.94	1.29	1.76	0.27	0.38	0.04	2.27	2.74	1.25	1.36	XXX
85390	26	A	Fibrinolysins screen	0.37	0.12	0.13	0.12	0.13	0.01	0.50	0.51	0.50	0.51	XXX
85396		A	Clotting assay, whole blood	0.37	NA	NA	0.04	0.13	0.04	NA	NA	0.45	0.54	XXX
85576	26	A	Blood platelet aggregation	0.37	0.12	0.15	0.12	0.15	0.01	0.50	0.53	0.50	0.53	XXX
86077		A	Physician blood bank service	0.94	0.37	0.39	0.29	0.37	0.03	1.34	1.36	1.26	1.34	XXX
86078		A	Physician blood bank service	0.94	0.37	0.44	0.29	0.37	0.03	1.34	1.41	1.26	1.34	XXX
86079		A	Physician blood bank service	0.94	0.37	0.43	0.29	0.38	0.03	1.34	1.40	1.26	1.35	XXX
86255	26	A	Fluorescent antibody, screen	0.37	0.11	0.14	0.11	0.14	0.01	0.49	0.52	0.49	0.52	XXX
86256	26	A	Fluorescent antibody, titer	0.37	0.11	0.14	0.11	0.14	0.01	0.49	0.52	0.49	0.52	XXX
86320	26	A	Serum immunoelectrophoresis	0.37	0.11	0.14	0.11	0.14	0.01	0.49	0.52	0.49	0.52	XXX
86325	26	A	Other immunoelectrophoresis	0.37	0.11	0.13	0.11	0.13	0.01	0.49	0.51	0.49	0.51	XXX
86327	26	A	Immunoelectrophoresis assay	0.42	0.13	0.17	0.13	0.17	0.02	0.57	0.61	0.57	0.61	XXX
86334	26	A	Immunofix e-phoresis, serum	0.37	0.11	0.14	0.11	0.14	0.01	0.49	0.52	0.49	0.52	XXX
86335	26	A	Immunfix e-phorsis/urine/csf	0.37	0.11	0.13	0.11	0.13	0.01	0.49	0.51	0.49	0.51	XXX
86490		A	Coccidioidomycosis skin test	0.00	0.12	0.25	NA	NA	0.02	0.14	0.27	NA	NA	XXX
86510		A	Histoplasmosis skin test	0.00	0.14	0.28	NA	NA	0.02	0.16	0.30	NA	NA	XXX
86580		A	TB intradermal test	0.00	0.16	0.23	NA	NA	0.02	0.18	0.25	NA	NA	XXX
87164	26	A	Dark field examination	0.37	0.12	0.12	0.12	0.12	0.01	0.50	0.50	0.50	0.50	XXX
87207	26	A	Smear, special stain	0.37	0.10	0.15	0.10	0.15	0.01	0.48	0.53	0.48	0.53	XXX
88104		A	Cytopathology, fluids	0.56	1.15	0.93	NA	NA	0.04	1.75	1.53	NA	NA	XXX
88104	26	A	Cytopathology, fluids	0.56	0.15	0.22	0.15	0.22	0.02	0.73	0.80	0.73	0.80	XXX
88104	TC	A	Cytopathology, fluids	0.00	1.00	0.71	NA	NA	0.02	1.02	0.73	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
88106		A	Cytopathology, fluids	0.56	1.50	1.39	NA	NA	0.04	2.10	1.99	NA	NA	XXX
88106	26	A	Cytopathology, fluids	0.56	0.15	0.22	0.15	0.22	0.02	0.73	0.80	0.73	0.80	XXX
88106	TC	A	Cytopathology, fluids	0.00	1.35	1.17	NA	NA	0.02	1.37	1.19	NA	NA	XXX
88107		A	Cytopathology, fluids	0.76	1.99	1.65	NA	NA	0.05	2.80	2.46	NA	NA	XXX
88107	26	A	Cytopathology, fluids	0.76	0.22	0.30	0.22	0.30	0.03	1.01	1.09	1.01	1.09	XXX
88107	TC	A	Cytopathology, fluids	0.00	1.76	1.35	NA	NA	0.02	1.78	1.37	NA	NA	XXX
88108		A	Cytopath, concentrate tech	0.56	1.47	1.28	NA	NA	0.04	2.07	1.88	NA	NA	XXX
88108	26	A	Cytopath, concentrate tech	0.56	0.15	0.22	0.15	0.22	0.02	0.73	0.80	0.73	0.80	XXX
88108	TC	A	Cytopath, concentrate tech	0.00	1.32	1.06	NA	NA	0.02	1.34	1.08	NA	NA	XXX
88112		A	Cytopath, cell enhance tech	1.18	1.50	1.85	NA	NA	0.04	2.72	3.07	NA	NA	XXX
88112	26	A	Cytopath, cell enhance tech	1.18	0.29	0.46	0.29	0.46	0.02	1.49	1.66	1.49	1.66	XXX
88112	TC	A	Cytopath, cell enhance tech	0.00	1.21	1.40	NA	NA	0.02	1.23	1.42	NA	NA	XXX
88125		A	Forensic cytopathology	0.26	0.25	0.27	NA	NA	0.02	0.53	0.55	NA	NA	XXX
88125	26	A	Forensic cytopathology	0.26	0.06	0.10	0.06	0.10	0.01	0.33	0.37	0.33	0.37	XXX
88125	TC	A	Forensic cytopathology	0.00	0.19	0.17	NA	NA	0.01	0.20	0.18	NA	NA	XXX
88141		A	Cytopath, c/v, interpret	0.42	0.38	0.21	0.38	0.21	0.02	0.82	0.65	0.82	0.65	XXX
88160		A	Cytopath smear, other source	0.50	0.90	0.85	NA	NA	0.04	1.44	1.39	NA	NA	XXX
88160	26	A	Cytopath smear, other source	0.50	0.13	0.19	0.13	0.19	0.02	0.65	0.71	0.65	0.71	XXX
88160	TC	A	Cytopath smear, other source	0.00	0.77	0.66	NA	NA	0.02	0.79	0.68	NA	NA	XXX
88161		A	Cytopath smear, other source	0.50	1.12	0.99	NA	NA	0.04	1.66	1.53	NA	NA	XXX
88161	26	A	Cytopath smear, other source	0.50	0.15	0.20	0.15	0.20	0.02	0.67	0.72	0.67	0.72	XXX
88161	TC	A	Cytopath smear, other source	0.00	0.97	0.79	NA	NA	0.02	0.99	0.81	NA	NA	XXX
88162		A	Cytopath smear, other source	0.76	1.16	1.06	NA	NA	0.05	1.97	1.87	NA	NA	XXX
88162	26	A	Cytopath smear, other source	0.76	0.16	0.29	0.16	0.29	0.03	0.95	1.08	0.95	1.08	XXX
88162	TC	A	Cytopath smear, other source	0.00	1.00	0.77	NA	NA	0.02	1.02	0.79	NA	NA	XXX
88172		A	Cytopathology eval of fna	0.60	0.85	0.76	NA	NA	0.04	1.49	1.40	NA	NA	XXX
88172	26	A	Cytopathology eval of fna	0.60	0.18	0.24	0.18	0.24	0.02	0.80	0.86	0.80	0.86	XXX
88172	TC	A	Cytopathology eval of fna	0.00	0.67	0.52	NA	NA	0.02	0.69	0.54	NA	NA	XXX
88173		A	Cytopath eval, fna, report	1.39	2.30	2.18	NA	NA	0.07	3.76	3.64	NA	NA	XXX
88173	26	A	Cytopath eval, fna, report	1.39	0.39	0.54	0.39	0.54	0.05	1.83	1.98	1.83	1.98	XXX
88173	TC	A	Cytopath eval, fna, report	0.00	1.91	1.64	NA	NA	0.02	1.93	1.66	NA	NA	XXX
88182		A	Cell marker study	0.77	1.95	1.97	NA	NA	0.07	2.79	2.81	NA	NA	XXX
88182	26	A	Cell marker study	0.77	0.12	0.28	0.12	0.28	0.03	0.92	1.08	0.92	1.08	XXX
88182	TC	A	Cell marker study	0.00	1.83	1.70	NA	NA	0.04	1.87	1.74	NA	NA	XXX
88184		A	Flowcytometry/ tc, 1 marker	0.00	2.50	1.62	NA	NA	0.02	2.52	1.64	NA	NA	XXX
88185		A	Flowcytometry/tc, add-on	0.00	1.52	0.86	NA	NA	0.02	1.54	0.88	NA	NA	ZZZ
88187		A	Flowcytometry/read, 2-8	1.36	0.38	0.43	0.38	0.43	0.01	1.75	1.80	1.75	1.80	XXX
88188		A	Flowcytometry/read, 9-15	1.69	0.43	0.54	0.43	0.54	0.01	2.13	2.24	2.13	2.24	XXX
88189		A	Flowcytometry/read, 16 & >	2.23	0.47	0.68	0.47	0.68	0.01	2.71	2.92	2.71	2.92	XXX
88291		A	Cyto/molecular report	0.52	0.27	0.20	0.27	0.20	0.02	0.81	0.74	0.81	0.74	XXX
88300		A	Surgical path, gross	0.08	0.59	0.49	NA	NA	0.02	0.69	0.59	NA	NA	XXX
88300	26	A	Surgical path, gross	0.08	0.02	0.03	0.02	0.03	0.01	0.11	0.12	0.11	0.12	XXX
88300	TC	A	Surgical path, gross	0.00	0.56	0.46	NA	NA	0.01	0.57	0.47	NA	NA	XXX
88302		A	Tissue exam by pathologist	0.13	1.29	1.10	NA	NA	0.03	1.45	1.26	NA	NA	XXX
88302	26	A	Tissue exam by pathologist	0.13	0.04	0.06	0.04	0.06	0.01	0.18	0.20	0.18	0.20	XXX
88302	TC	A	Tissue exam by pathologist	0.00	1.25	1.04	NA	NA	0.02	1.27	1.06	NA	NA	XXX
88304		A	Tissue exam by pathologist	0.22	1.53	1.37	NA	NA	0.03	1.78	1.62	NA	NA	XXX
88304	26	A	Tissue exam by pathologist	0.22	0.06	0.08	0.06	0.08	0.01	0.29	0.31	0.29	0.31	XXX
88304	TC	A	Tissue exam by pathologist	0.00	1.47	1.29	NA	NA	0.02	1.49	1.31	NA	NA	XXX
88305		A	Tissue exam by pathologist	0.75	2.18	1.98	NA	NA	0.07	3.00	2.80	NA	NA	XXX
88305	26	A	Tissue exam by pathologist	0.75	0.21	0.30	0.21	0.30	0.03	0.99	1.08	0.99	1.08	XXX
88305	TC	A	Tissue exam by pathologist	0.00	1.98	1.68	NA	NA	0.04	2.02	1.72	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
88307		A	Tissue exam by pathologist	1.59	4.48	3.49	NA	NA	0.12	6.19	5.20	NA	NA	XXX
88307	26	A	Tissue exam by pathologist	1.59	0.47	0.63	0.47	0.63	0.06	2.12	2.28	2.12	2.28	XXX
88307	TC	A	Tissue exam by pathologist	0.00	4.02	2.87	NA	NA	0.06	4.08	2.93	NA	NA	XXX
88309		A	Tissue exam by pathologist	2.80	6.28	4.87	NA	NA	0.14	9.22	7.81	NA	NA	XXX
88309	26	A	Tissue exam by pathologist	2.80	0.82	0.93	0.82	0.93	0.08	3.70	3.81	3.70	3.81	XXX
88309	TC	A	Tissue exam by pathologist	0.00	5.46	3.94	NA	NA	0.06	5.52	4.00	NA	NA	XXX
88311		A	Decalcify tissue	0.24	0.25	0.24	NA	NA	0.02	0.51	0.50	NA	NA	XXX
88311	26	A	Decalcify tissue	0.24	0.07	0.09	0.07	0.09	0.01	0.32	0.34	0.32	0.34	XXX
88311	TC	A	Decalcify tissue	0.00	0.18	0.14	NA	NA	0.01	0.19	0.15	NA	NA	XXX
88312		A	Special stains	0.54	2.49	1.76	NA	NA	0.03	3.06	2.33	NA	NA	XXX
88312	26	A	Special stains	0.54	0.14	0.21	0.14	0.21	0.02	0.70	0.77	0.70	0.77	XXX
88312	TC	A	Special stains	0.00	2.34	1.55	NA	NA	0.01	2.35	1.56	NA	NA	XXX
88313		A	Special stains	0.24	1.94	1.42	NA	NA	0.02	2.20	1.68	NA	NA	XXX
88313	26	A	Special stains	0.24	0.06	0.09	0.06	0.09	0.01	0.31	0.34	0.31	0.34	XXX
88313	TC	A	Special stains	0.00	1.88	1.33	NA	NA	0.01	1.89	1.34	NA	NA	XXX
88314		A	Histochemical stain	0.45	1.98	2.05	NA	NA	0.04	2.47	2.54	NA	NA	XXX
88314	26	A	Histochemical stain	0.45	0.14	0.18	0.14	0.18	0.02	0.61	0.65	0.61	0.65	XXX
88314	TC	A	Histochemical stain	0.00	1.84	1.87	NA	NA	0.02	1.86	1.89	NA	NA	XXX
88318		A	Chemical histochemistry	0.42	2.98	1.98	NA	NA	0.03	3.43	2.43	NA	NA	XXX
88318	26	A	Chemical histochemistry	0.42	0.12	0.17	0.12	0.17	0.02	0.56	0.61	0.56	0.61	XXX
88318	TC	A	Chemical histochemistry	0.00	2.85	1.82	NA	NA	0.01	2.86	1.83	NA	NA	XXX
88319		A	Enzyme histochemistry	0.53	3.25	3.38	NA	NA	0.04	3.82	3.95	NA	NA	XXX
88319	26	A	Enzyme histochemistry	0.53	0.15	0.20	0.15	0.20	0.02	0.70	0.75	0.70	0.75	XXX
88319	TC	A	Enzyme histochemistry	0.00	3.10	3.18	NA	NA	0.02	3.12	3.20	NA	NA	XXX
88321		A	Microslide consultation	1.63	0.73	0.78	0.47	0.54	0.05	2.41	2.46	2.15	2.22	XXX
88323		A	Microslide consultation	1.83	2.21	1.89	NA	NA	0.07	4.11	3.79	NA	NA	XXX
88323	26	A	Microslide consultation	1.83	0.45	0.54	0.45	0.54	0.05	2.33	2.42	2.33	2.42	XXX
88323	TC	A	Microslide consultation	0.00	1.76	1.35	NA	NA	0.02	1.78	1.37	NA	NA	XXX
88325		A	Comprehensive review of data	2.50	2.24	2.77	0.61	0.87	0.07	4.81	5.34	3.18	3.44	XXX
88329		A	Path consult introp	0.67	0.68	0.66	0.20	0.27	0.02	1.37	1.35	0.89	0.96	XXX
88331		A	Path consult intraop, 1 bloc	1.19	1.24	1.14	NA	NA	0.08	2.51	2.41	NA	NA	XXX
88331	26	A	Path consult intraop, 1 bloc	1.19	0.36	0.47	0.36	0.47	0.04	1.59	1.70	1.59	1.70	XXX
88331	TC	A	Path consult intraop, 1 bloc	0.00	0.87	0.66	NA	NA	0.04	0.91	0.70	NA	NA	XXX
88332		A	Path consult intraop, addII	0.59	0.47	0.46	NA	NA	0.04	1.10	1.09	NA	NA	XXX
88332	26	A	Path consult intraop, addII	0.59	0.17	0.23	0.17	0.23	0.02	0.78	0.84	0.78	0.84	XXX
88332	TC	A	Path consult intraop, addII	0.00	0.29	0.23	NA	NA	0.02	0.31	0.25	NA	NA	XXX
88333		A	Intraop cyto path consult, 1	1.20	1.34	1.15	NA	NA	0.08	2.62	2.43	NA	NA	XXX
88333	26	A	Intraop cyto path consult, 1	1.20	0.37	0.49	0.37	0.49	0.04	1.61	1.73	1.61	1.73	XXX
88333	TC	A	Intraop cyto path consult, 1	0.00	0.97	0.66	NA	NA	0.04	1.01	0.70	NA	NA	XXX
88334		A	Intraop cyto path consult, 2	0.59	0.74	0.64	NA	NA	0.04	1.37	1.27	NA	NA	XXX
88334	26	A	Intraop cyto path consult, 2	0.59	0.17	0.24	0.17	0.24	0.02	0.78	0.85	0.78	0.85	XXX
88334	TC	A	Intraop cyto path consult, 2	0.00	0.57	0.40	NA	NA	0.02	0.59	0.42	NA	NA	XXX
88342		A	Immunohistochemistry	0.85	2.03	1.60	NA	NA	0.05	2.93	2.50	NA	NA	XXX
88342	26	A	Immunohistochemistry	0.85	0.22	0.33	0.22	0.33	0.03	1.10	1.21	1.10	1.21	XXX
88342	TC	A	Immunohistochemistry	0.00	1.81	1.28	NA	NA	0.02	1.83	1.30	NA	NA	XXX
88346		A	Immunofluorescent study	0.86	1.96	1.67	NA	NA	0.05	2.87	2.58	NA	NA	XXX
88346	26	A	Immunofluorescent study	0.86	0.23	0.33	0.23	0.33	0.03	1.12	1.22	1.12	1.22	XXX
88346	TC	A	Immunofluorescent study	0.00	1.74	1.34	NA	NA	0.02	1.76	1.36	NA	NA	XXX
88347		A	Immunofluorescent study	0.86	1.34	1.28	NA	NA	0.05	2.25	2.19	NA	NA	XXX
88347	26	A	Immunofluorescent study	0.86	0.19	0.31	0.19	0.31	0.03	1.08	1.20	1.08	1.20	XXX
88347	TC	A	Immunofluorescent study	0.00	1.16	0.97	NA	NA	0.02	1.18	0.99	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
88348		A	Electron microscopy	1.51	18.07	11.55	NA	NA	0.13	19.71	13.19	NA	NA	XXX
88348	26	A	Electron microscopy	1.51	0.40	0.58	0.40	0.58	0.06	1.97	2.15	1.97	2.15	XXX
88348	TC	A	Electron microscopy	0.00	17.67	10.97	NA	NA	0.07	17.74	11.04	NA	NA	XXX
88349		A	Scanning electron microscopy	0.76	8.90	4.90	NA	NA	0.09	9.75	5.75	NA	NA	XXX
88349	26	A	Scanning electron microscopy	0.76	0.22	0.30	0.22	0.30	0.03	1.01	1.09	1.01	1.09	XXX
88349	TC	A	Scanning electron microscopy	0.00	8.69	4.60	NA	NA	0.06	8.75	4.66	NA	NA	XXX
88355		A	Analysis, skeletal muscle	1.85	3.37	7.44	NA	NA	0.13	5.35	9.42	NA	NA	XXX
88355	26	A	Analysis, skeletal muscle	1.85	0.39	0.69	0.39	0.69	0.07	2.31	2.61	2.31	2.61	XXX
88355	TC	A	Analysis, skeletal muscle	0.00	2.98	6.75	NA	NA	0.06	3.04	6.81	NA	NA	XXX
88356		A	Analysis, nerve	3.02	6.64	4.80	NA	NA	0.19	9.85	8.01	NA	NA	XXX
88356	26	A	Analysis, nerve	3.02	0.76	1.14	0.76	1.14	0.12	3.90	4.28	3.90	4.28	XXX
88356	TC	A	Analysis, nerve	0.00	5.88	3.67	NA	NA	0.07	5.95	3.74	NA	NA	XXX
88358		A	Analysis, tumor	0.95	1.12	0.91	NA	NA	0.17	2.24	2.03	NA	NA	XXX
88358	26	A	Analysis, tumor	0.95	0.16	0.34	0.16	0.34	0.10	1.21	1.39	1.21	1.39	XXX
88358	TC	A	Analysis, tumor	0.00	0.96	0.57	NA	NA	0.07	1.03	0.64	NA	NA	XXX
88360		A	Tumor immunohistochem/manual	1.10	2.31	1.88	NA	NA	0.08	3.49	3.06	NA	NA	XXX
88360	26	A	Tumor immunohistochem/manual	1.10	0.27	0.42	0.27	0.42	0.06	1.43	1.58	1.43	1.58	XXX
88360	TC	A	Tumor immunohistochem/manual	0.00	2.03	1.45	NA	NA	0.02	2.05	1.47	NA	NA	XXX
88361		A	Tumor immunohistochem/comput	1.18	2.76	2.96	NA	NA	0.17	4.11	4.31	NA	NA	XXX
88361	26	A	Tumor immunohistochem/comput	1.18	0.25	0.43	0.25	0.43	0.10	1.53	1.71	1.53	1.71	XXX
88361	TC	A	Tumor immunohistochem/comput	0.00	2.51	2.53	NA	NA	0.07	2.58	2.60	NA	NA	XXX
88362		A	Nerve teasing preparations	2.17	5.23	4.83	NA	NA	0.15	7.55	7.15	NA	NA	XXX
88362	26	A	Nerve teasing preparations	2.17	0.58	0.84	0.58	0.84	0.09	2.84	3.10	2.84	3.10	XXX
88362	TC	A	Nerve teasing preparations	0.00	4.64	4.00	NA	NA	0.06	4.70	4.06	NA	NA	XXX
88365		A	Insitu hybridization (fish)	1.20	2.95	2.34	NA	NA	0.05	4.20	3.59	NA	NA	XXX
88365	26	A	Insitu hybridization (fish)	1.20	0.24	0.44	0.24	0.44	0.03	1.47	1.67	1.47	1.67	XXX
88365	TC	A	Insitu hybridization (fish)	0.00	2.71	1.89	NA	NA	0.02	2.73	1.91	NA	NA	XXX
88367		A	Insitu hybridization, auto	1.30	5.27	4.35	NA	NA	0.12	6.69	5.77	NA	NA	XXX
88367	26	A	Insitu hybridization, auto	1.30	0.22	0.46	0.22	0.46	0.06	1.58	1.82	1.58	1.82	XXX
88367	TC	A	Insitu hybridization, auto	0.00	5.05	3.89	NA	NA	0.06	5.11	3.95	NA	NA	XXX
88368		A	Insitu hybridization, manual	1.40	4.79	3.00	NA	NA	0.12	6.31	4.52	NA	NA	XXX
88368	26	A	Insitu hybridization, manual	1.40	0.21	0.50	0.21	0.50	0.06	1.67	1.96	1.67	1.96	XXX
88368	TC	A	Insitu hybridization, manual	0.00	4.58	2.50	NA	NA	0.06	4.64	2.56	NA	NA	XXX
88371	26	A	Protein, western blot tissue	0.37	0.10	0.12	0.10	0.12	0.01	0.48	0.50	0.48	0.50	XXX
88372	26	A	Protein analysis w/probe	0.37	0.11	0.15	0.11	0.15	0.01	0.49	0.53	0.49	0.53	XXX
88385		A	Eval molecul probes, 51–250	1.50	14.66	8.99	NA	NA	0.12	16.28	10.61	NA	NA	XXX
88385	26	A	Eval molecul probes, 51–250	1.50	0.22	0.54	0.22	0.54	0.06	1.78	2.10	1.78	2.10	XXX
88385	TC	A	Eval molecul probes, 51–250	0.00	14.44	8.45	NA	NA	0.06	14.50	8.51	NA	NA	XXX
88386		A	Eval molecul probes, 251–500	1.88	14.56	8.93	NA	NA	0.16	16.60	10.97	NA	NA	XXX
88386	26	A	Eval molecul probes, 251–500	1.88	0.28	0.69	0.28	0.69	0.08	2.24	2.65	2.24	2.65	XXX
88386	TC	A	Eval molecul probes, 251–500	0.00	14.28	8.24	NA	NA	0.08	14.36	8.32	NA	NA	XXX
89049		A	Chct for mal hyperthermia	1.40	3.59	3.57	0.18	0.25	0.06	5.05	5.03	1.64	1.71	XXX
89060	26	A	Exam,synovial fluid crystals	0.37	0.11	0.15	0.11	0.15	0.01	0.49	0.53	0.49	0.53	XXX
89100		A	Sample intestinal contents	0.60	9.16	3.67	0.62	0.31	0.03	9.79	4.30	1.25	0.94	XXX
89105		A	Sample intestinal contents	0.50	7.70	3.60	0.45	0.24	0.02	8.22	4.12	0.97	0.76	XXX
89130		A	Sample stomach contents	0.45	6.96	3.05	0.40	0.20	0.02	7.43	3.52	0.87	0.67	XXX
89132		A	Sample stomach contents	0.19	6.56	2.80	0.30	0.12	0.01	6.76	3.00	0.50	0.32	XXX
89135		A	Sample stomach contents	0.79	9.15	3.71	0.70	0.36	0.04	9.98	4.54	1.53	1.19	XXX
89136		A	Sample stomach contents	0.21	7.05	3.07	0.32	0.15	0.01	7.27	3.29	0.54	0.37	XXX
89140		A	Sample stomach contents	0.94	6.81	3.27	0.49	0.33	0.04	7.79	4.25	1.47	1.31	XXX
89141		A	Sample stomach contents	0.85	5.59	3.50	0.41	0.35	0.03	6.47	4.38	1.29	1.23	XXX
89220		A	Sputum specimen collection	0.00	0.36	0.41	NA	NA	0.02	0.38	0.43	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
89230		A	Collect sweat for test	0.00	0.08	0.10	NA	NA	0.02	0.10	0.12	NA	NA	XXX
90465		A	Ther/proph/diag inj, sc/im	0.17	0.45	0.35	NA	NA	0.01	0.63	0.53	NA	NA	XXX
90466		A	Immune admin addl inj, < 8 y	0.15	0.12	0.13	NA	NA	0.01	0.28	0.29	NA	NA	ZZZ
90467		R	Immune admin o or n, < 8 yrs	0.17	0.17	0.17	0.07	0.09	0.01	0.35	0.35	0.25	0.27	XXX
90468		R	Immune admin o/n, addl < 8 y	0.15	0.10	0.11	0.03	0.05	0.01	0.26	0.27	0.19	0.21	ZZZ
90471		A	Ther/proph/diag inj, sc/im	0.17	0.45	0.35	NA	NA	0.01	0.63	0.53	NA	NA	XXX
90472		A	Immunization admin, each add	0.15	0.12	0.13	NA	NA	0.01	0.28	0.29	NA	NA	ZZZ
90473		R	Immune admin oral/nasal	0.17	0.16	0.18	0.04	0.06	0.01	0.34	0.36	0.22	0.24	XXX
90474		R	Immune admin oral/nasal addl	0.15	0.07	0.09	0.03	0.05	0.01	0.23	0.25	0.19	0.21	ZZZ
90760		A	Hydration iv infusion, init	0.17	1.32	1.40	NA	NA	0.07	1.56	1.64	NA	NA	XXX
90761		A	Hydrate iv infusion, add-on	0.09	0.32	0.38	NA	NA	0.04	0.45	0.51	NA	NA	ZZZ
90765		A	Ther/proph/diag iv inf, init	0.21	1.63	1.73	NA	NA	0.07	1.91	2.01	NA	NA	XXX
90766		A	Ther/proph/dg iv inf, add-on	0.18	0.38	0.44	NA	NA	0.04	0.60	0.66	NA	NA	ZZZ
90767		A	Tx/proph/dg addl seq iv inf	0.19	0.69	0.84	NA	NA	0.04	0.92	1.07	NA	NA	ZZZ
90768		A	Ther/diag concurrent inf	0.17	0.33	0.41	NA	NA	0.04	0.54	0.62	NA	NA	ZZZ
90772		A	Ther/proph/diag inj, sc/im	0.17	0.45	0.35	NA	NA	0.01	0.63	0.53	NA	NA	XXX
90773		A	Ther/proph/diag inj, ia	0.17	0.30	0.31	NA	NA	0.02	0.49	0.50	NA	NA	XXX
90774		A	Ther/proph/diag inj, iv push	0.18	1.35	1.31	NA	NA	0.04	1.57	1.53	NA	NA	XXX
90775		A	Ther/proph/diag inj add-on	0.10	0.51	0.56	NA	NA	0.04	0.65	0.70	NA	NA	ZZZ
90801		A	Psy dx interview	2.80	1.43	1.24	0.57	0.84	0.06	4.29	4.10	3.43	3.70	XXX
90802		A	Intac psy dx interview	3.01	1.48	1.27	0.63	0.89	0.07	4.56	4.35	3.71	3.97	XXX
90804		A	Psytx, office, 20-30 min	1.21	0.53	0.50	0.20	0.34	0.03	1.77	1.74	1.44	1.58	XXX
90805		A	Psytx, off, 20-30 min w/e&m	1.37	0.58	0.52	0.23	0.37	0.03	1.98	1.92	1.63	1.77	XXX
90806		A	Psytx, off, 45-50 min	1.86	0.50	0.65	0.31	0.53	0.04	2.40	2.55	2.21	2.43	XXX
90807		A	Psytx, off, 45-50 min w/e&m	2.02	0.68	0.70	0.34	0.56	0.05	2.75	2.77	2.41	2.63	XXX
90808		A	Psytx, office, 75-80 min	2.79	0.65	0.94	0.47	0.79	0.06	3.50	3.79	3.32	3.64	XXX
90809		A	Psytx, off, 75-80, w/e&m	2.95	0.83	0.96	0.50	0.82	0.07	3.85	3.98	3.52	3.84	XXX
90810		A	Intac psytx, off, 20–30 min	1.32	0.50	0.51	0.23	0.37	0.04	1.86	1.87	1.59	1.73	XXX
90811		A	Intac psytx, 20–30, w/e&m	1.48	0.70	0.60	0.25	0.41	0.04	2.22	2.12	1.77	1.93	XXX
90812		A	Intac psytx, off, 45–50 min	1.97	0.62	0.75	0.33	0.56	0.04	2.63	2.76	2.34	2.57	XXX
90813		A	Intac psytx, 45–50 min w/e&m	2.13	0.80	0.78	0.36	0.59	0.05	2.98	2.96	2.54	2.77	XXX
90814		A	Intac psytx, off, 75–80 min	2.90	0.76	1.02	0.49	0.86	0.06	3.72	3.98	3.45	3.82	XXX
90815		A	Intac psytx, 75–80 w/e&m	3.06	0.96	1.03	0.51	0.84	0.07	4.09	4.16	3.64	3.97	XXX
90816		A	Psytx, hosp, 20–30 min	1.25	NA	NA	0.31	0.42	0.03	NA	NA	1.59	1.70	XXX
90817		A	Psytx, hosp, 20–30 min w/e&m	1.41	NA	NA	0.34	0.43	0.03	NA	NA	1.78	1.87	XXX
90818		A	Psytx, hosp, 45–50 min	1.89	NA	NA	0.41	0.62	0.04	NA	NA	2.34	2.55	XXX
90819		A	Psytx, hosp, 45–50 min w/e&m	2.05	NA	NA	0.45	0.60	0.05	NA	NA	2.55	2.70	XXX
90821		A	Psytx, hosp, 75–80 min	2.83	NA	NA	0.57	0.90	0.06	NA	NA	3.46	3.79	XXX
90822		A	Psytx, hosp, 75–80 min w/e&m	2.99	NA	NA	0.61	0.87	0.08	NA	NA	3.68	3.94	XXX
90823		A	Intac psytx, hosp, 20–30 min	1.36	NA	NA	0.33	0.44	0.03	NA	NA	1.72	1.83	XXX
90824		A	Intac psytx, hsp 20–30 w/e&m	1.52	NA	NA	0.36	0.46	0.04	NA	NA	1.92	2.02	XXX
90826		A	Intac psytx, hosp, 45–50 min	2.01	NA	NA	0.43	0.65	0.05	NA	NA	2.49	2.71	XXX
90827		A	Intac psytx, hsp 45–50 w/e&m	2.16	NA	NA	0.46	0.63	0.05	NA	NA	2.67	2.84	XXX
90828		A	Intac psytx, hosp, 75–80 min	2.94	NA	NA	0.59	0.94	0.06	NA	NA	3.59	3.94	XXX
90829		A	Intac psytx, hsp 75–80 w/e&m	3.10	NA	NA	0.62	0.89	0.07	NA	NA	3.79	4.06	XXX
90845		A	Psychoanalysis	1.79	0.37	0.53	0.30	0.49	0.04	2.20	2.36	2.13	2.32	XXX
90846		R	Family psytx w/o patient	1.83	0.49	0.61	0.41	0.59	0.04	2.36	2.48	2.28	2.46	XXX
90847		R	Family psytx w/patient	2.21	0.71	0.79	0.47	0.69	0.05	2.97	3.05	2.73	2.95	XXX
90849		R	Multiple family group psytx	0.59	0.30	0.28	0.19	0.23	0.02	0.91	0.89	0.80	0.84	XXX
90853		A	Group psychotherapy	0.59	0.26	0.25	0.19	0.22	0.01	0.86	0.85	0.79	0.82	XXX
90857		A	Intac group psytx	0.63	0.35	0.31	0.20	0.24	0.01	0.99	0.95	0.84	0.88	XXX
90862		A	Medication management	0.95	0.60	0.45	0.26	0.31	0.02	1.57	1.42	1.23	1.28	XXX

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CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
90865		A	Narcosynthesis	2.84	1.16	1.31	0.62	0.84	0.12	4.12	4.27	3.58	3.80	XXX
90870		A	Electroconvulsive therapy	1.88	1.84	1.92	0.37	0.54	0.04	3.76	3.84	2.29	2.46	000
90875		N	Psychophysiological therapy	1.20	0.52	0.81	0.27	0.41	0.04	1.76	2.05	1.51	1.65	XXX
90876		N	Psychophysiological therapy	1.90	0.66	1.04	0.43	0.66	0.05	2.61	2.99	2.38	2.61	XXX
90880		A	Hypnotherapy	2.19	0.55	0.92	0.36	0.61	0.05	2.79	3.16	2.60	2.85	XXX
90885		B	Psy evaluation of records	0.97	0.22	0.33	0.22	0.33	0.02	1.21	1.32	1.21	1.32	XXX
90887		B	Consultation with family	1.48	0.60	0.77	0.33	0.50	0.04	2.12	2.29	1.85	2.02	XXX
90901		A	Biofeedback train, any meth	0.41	0.48	0.61	0.11	0.13	0.02	0.91	1.04	0.54	0.56	000
90911		A	Biofeedback peri/uro/rectal	0.89	1.40	1.52	0.31	0.31	0.06	2.35	2.47	1.26	1.26	000
90918		I	ESRD related services, month	11.16	4.64	5.76	3.68	5.52	0.36	16.16	17.28	15.20	17.04	XXX
90919		I	ESRD related services, month	8.53	2.98	3.75	2.50	3.63	0.29	11.80	12.57	11.32	12.45	XXX
90920		I	ESRD related services, month	7.26	2.70	3.50	2.23	3.38	0.23	10.19	10.99	9.72	10.87	XXX
90921		I	ESRD related services, month	4.46	1.68	2.26	1.59	2.24	0.14	6.28	6.86	6.19	6.84	XXX
90922		I	ESRD related services, day	0.37	0.16	0.20	0.12	0.19	0.01	0.54	0.58	0.50	0.57	XXX
90923		I	Esrd related services, day	0.28	0.09	0.12	0.08	0.12	0.01	0.38	0.41	0.37	0.41	XXX
90924		I	Esrd related services, day	0.24	0.09	0.11	0.07	0.11	0.01	0.34	0.36	0.32	0.36	XXX
90925		I	Esrd related services, day	0.15	0.05	0.07	0.05	0.07	0.01	0.21	0.23	0.21	0.23	XXX
90935		A	Hemodialysis, one evaluation	1.22	NA	NA	0.53	0.64	0.04	NA	NA	1.79	1.90	000
90937		A	Hemodialysis, repeated eval	2.11	NA	NA	0.76	0.92	0.07	NA	NA	2.94	3.10	000
90945		A	Dialysis, one evaluation	1.28	NA	NA	0.55	0.66	0.04	NA	NA	1.87	1.98	000
90947		A	Dialysis, repeated eval	2.16	NA	NA	0.78	0.94	0.07	NA	NA	3.01	3.17	000
90997		A	Hemoperfusion	1.84	NA	NA	0.49	0.62	0.06	NA	NA	2.39	2.52	000
91000		A	Esophageal intubation	0.73	2.22	0.80	NA	NA	0.04	2.99	1.57	NA	NA	000
91000	26	A	Esophageal intubation	0.73	0.24	0.25	0.24	0.25	0.03	1.00	1.01	1.00	1.01	000
91000	TC	A	Esophageal intubation	0.00	1.98	0.56	NA	NA	0.01	1.99	0.57	NA	NA	000
91010		A	Esophagus motility study	1.25	4.79	4.51	NA	NA	0.12	6.16	5.88	NA	NA	000
91010	26	A	Esophagus motility study	1.25	0.57	0.47	0.57	0.47	0.06	1.88	1.78	1.88	1.78	000
91010	TC	A	Esophagus motility study	0.00	4.22	4.04	NA	NA	0.06	4.28	4.10	NA	NA	000
91011		A	Esophagus motility study	1.50	5.59	5.33	NA	NA	0.13	7.22	6.96	NA	NA	000
91011	26	A	Esophagus motility study	1.50	0.74	0.58	0.74	0.58	0.07	2.31	2.15	2.31	2.15	000
91011	TC	A	Esophagus motility study	0.00	4.85	4.75	NA	NA	0.06	4.91	4.81	NA	NA	000
91012		A	Esophagus motility study	1.46	5.78	5.77	NA	NA	0.13	7.37	7.36	NA	NA	000
91012	26	A	Esophagus motility study	1.46	0.72	0.56	0.72	0.56	0.06	2.24	2.08	2.24	2.08	000
91012	TC	A	Esophagus motility study	0.00	5.06	5.21	NA	NA	0.07	5.13	5.28	NA	NA	000
91020		A	Gastric motility studies	1.44	5.03	4.66	NA	NA	0.13	6.60	6.23	NA	NA	000
91020	26	A	Gastric motility studies	1.44	0.63	0.53	0.63	0.53	0.07	2.14	2.04	2.14	2.04	000
91020	TC	A	Gastric motility studies	0.00	4.40	4.13	NA	NA	0.06	4.46	4.19	NA	NA	000
91022		A	Duodenal motility study	1.44	3.19	4.11	NA	NA	0.13	4.76	5.68	NA	NA	000
91022	26	A	Duodenal motility study	1.44	0.63	0.54	0.63	0.54	0.07	2.14	2.05	2.14	2.05	000
91022	TC	A	Duodenal motility study	0.00	2.56	3.57	NA	NA	0.06	2.62	3.63	NA	NA	000
91030		A	Acid perfusion of esophagus	0.91	3.03	2.59	NA	NA	0.06	4.00	3.56	NA	NA	000
91030	26	A	Acid perfusion of esophagus	0.91	0.45	0.35	0.45	0.35	0.04	1.40	1.30	1.40	1.30	000
91030	TC	A	Acid perfusion of esophagus	0.00	2.58	2.24	NA	NA	0.02	2.60	2.26	NA	NA	000
91034		A	Gastroesophageal reflux test	0.97	5.81	5.39	NA	NA	0.12	6.90	6.48	NA	NA	000
91034	26	A	Gastroesophageal reflux test	0.97	0.43	0.36	0.43	0.36	0.06	1.46	1.39	1.46	1.39	000
91034	TC	A	Gastroesophageal reflux test	0.00	5.38	5.03	NA	NA	0.06	5.44	5.09	NA	NA	000
91035		A	G-esoph reflx tst w/electrod	1.59	11.66	11.04	NA	NA	0.12	13.37	12.75	NA	NA	000
91035	26	A	G-esoph reflx tst w/electrod	1.59	0.73	0.60	0.73	0.60	0.06	2.38	2.25	2.38	2.25	000
91035	TC	A	G-esoph reflx tst w/electrod	0.00	10.93	10.44	NA	NA	0.06	10.99	10.50	NA	NA	000
91037		A	Esoph imped function test	0.97	3.50	3.08	NA	NA	0.12	4.59	4.17	NA	NA	000
91037	26	A	Esoph imped function test	0.97	0.44	0.37	0.44	0.37	0.06	1.47	1.40	1.47	1.40	000
91037	TC	A	Esoph imped function test	0.00	3.06	2.72	NA	NA	0.06	3.12	2.78	NA	NA	000

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
91038		A	Esoph imped funct test > 1h	1.10	2.85	2.39	NA	NA	0.12	4.07	3.61	NA	NA	000
91038	26	A	Esoph imped funct test > 1h	1.10	0.52	0.42	0.52	0.42	0.06	1.68	1.58	1.68	1.58	000
91038	TC	A	Esoph imped funct test > 1h	0.00	2.32	1.96	NA	NA	0.06	2.38	2.02	NA	NA	000
91040		A	Esoph balloon distension tst	0.97	9.54	10.76	NA	NA	0.12	10.63	11.85	NA	NA	000
91040	26	A	Esoph balloon distension tst	0.97	0.39	0.35	0.39	0.35	0.06	1.42	1.38	1.42	1.38	000
91040	TC	A	Esoph balloon distension tst	0.00	9.15	10.40	NA	NA	0.06	9.21	10.46	NA	NA	000
91052		A	Gastric analysis test	0.79	3.10	2.62	NA	NA	0.05	3.94	3.46	NA	NA	000
91052	26	A	Gastric analysis test	0.79	0.39	0.31	0.39	0.31	0.03	1.21	1.13	1.21	1.13	000
91052	TC	A	Gastric analysis test	0.00	2.71	2.31	NA	NA	0.02	2.73	2.33	NA	NA	000
91055		A	Gastric intubation for smear	0.94	2.42	2.82	NA	NA	0.07	3.43	3.83	NA	NA	000
91055	26	A	Gastric intubation for smear	0.94	0.27	0.27	0.27	0.27	0.05	1.26	1.26	1.26	1.26	000
91055	TC	A	Gastric intubation for smear	0.00	2.15	2.55	NA	NA	0.02	2.17	2.57	NA	NA	000
91060		A	Gastric saline load test	0.45	1.64	1.89	NA	NA	0.05	2.14	2.39	NA	NA	000
91060	26	A	Gastric saline load test	0.45	0.11	0.13	0.11	0.13	0.03	0.59	0.61	0.59	0.61	000
91060	TC	A	Gastric saline load test	0.00	1.53	1.76	NA	NA	0.02	1.55	1.78	NA	NA	000
91065		A	Breath hydrogen test	0.20	1.39	1.44	NA	NA	0.03	1.62	1.67	NA	NA	000
91065	26	A	Breath hydrogen test	0.20	0.07	0.07	0.07	0.07	0.01	0.28	0.28	0.28	0.28	000
91065	TC	A	Breath hydrogen test	0.00	1.32	1.37	NA	NA	0.02	1.34	1.39	NA	NA	000
91100		A	Pass intestine bleeding tube	1.08	2.15	2.64	0.37	0.30	0.07	3.30	3.79	1.52	1.45	000
91105		A	Gastric intubation treatment	0.37	1.75	2.02	0.07	0.09	0.03	2.15	2.42	0.47	0.49	000
91110		A	Gi tract capsule endoscopy	3.64	21.22	21.99	NA	NA	0.16	25.02	25.79	NA	NA	XXX
91110	26	A	Gi tract capsule endoscopy	3.64	1.74	1.40	1.74	1.40	0.09	5.47	5.13	5.47	5.13	XXX
91110	TC	A	Gi tract capsule endoscopy	0.00	19.48	20.59	NA	NA	0.07	19.55	20.66	NA	NA	XXX
91120		A	Rectal sensation test	0.97	9.15	10.55	NA	NA	0.11	10.23	11.63	NA	NA	XXX
91120	26	A	Rectal sensation test	0.97	0.30	0.33	0.30	0.33	0.07	1.34	1.37	1.34	1.37	XXX
91120	TC	A	Rectal sensation test	0.00	8.85	10.22	NA	NA	0.04	8.89	10.26	NA	NA	XXX
91122		A	Anal pressure record	1.77	3.83	4.79	NA	NA	0.21	5.81	6.77	NA	NA	000
91122	26	A	Anal pressure record	1.77	0.52	0.58	0.52	0.58	0.13	2.42	2.48	2.42	2.48	000
91122	TC	A	Anal pressure record	0.00	3.32	4.21	NA	NA	0.08	3.40	4.29	NA	NA	000
91132	26	A	Electrogastrography	0.52	0.27	0.20	0.27	0.20	0.02	0.81	0.74	0.81	0.74	XXX
91133	26	A	Electrogastrography w/test	0.66	0.31	0.25	0.31	0.25	0.03	1.00	0.94	1.00	0.94	XXX
92002		A	Eye exam, new patient	0.88	0.96	0.97	0.26	0.32	0.02	1.86	1.87	1.16	1.22	XXX
92004		A	Eye exam, new patient	1.67	1.57	1.67	0.52	0.64	0.04	3.28	3.38	2.23	2.35	XXX
92012		A	Eye exam established pat	0.67	0.93	1.01	0.23	0.28	0.02	1.62	1.70	0.92	0.97	XXX
92014		A	Eye exam & treatment	1.10	1.30	1.38	0.36	0.44	0.03	2.43	2.51	1.49	1.57	XXX
92015		N	Refraction	0.38	0.10	1.14	0.09	0.14	0.01	0.49	1.53	0.48	0.53	XXX
92018		A	New eye exam & treatment	2.50	NA	NA	0.88	1.02	0.07	NA	NA	3.45	3.59	XXX
92019		A	Eye exam & treatment	1.31	NA	NA	0.42	0.53	0.03	NA	NA	1.76	1.87	XXX
92020		A	Special eye evaluation	0.37	0.25	0.32	0.13	0.15	0.01	0.63	0.70	0.51	0.53	XXX
92060		A	Special eye evaluation	0.69	0.77	0.74	NA	NA	0.03	1.49	1.46	NA	NA	XXX
92060	26	A	Special eye evaluation	0.69	0.23	0.28	0.23	0.28	0.02	0.94	0.99	0.94	0.99	XXX
92060	TC	A	Special eye evaluation	0.00	0.55	0.47	NA	NA	0.01	0.56	0.48	NA	NA	XXX
92065		A	Orthoptic/pleoptic training	0.37	0.87	0.62	NA	NA	0.02	1.26	1.01	NA	NA	XXX
92065	26	A	Orthoptic/pleoptic training	0.37	0.09	0.14	0.09	0.14	0.01	0.47	0.52	0.47	0.52	XXX
92065	TC	A	Orthoptic/pleoptic training	0.00	0.78	0.48	NA	NA	0.01	0.79	0.49	NA	NA	XXX
92070		A	Fitting of contact lens	0.70	0.92	1.03	0.23	0.30	0.02	1.64	1.75	0.95	1.02	XXX
92081		A	Visual field examination(s)	0.36	0.96	0.95	NA	NA	0.02	1.34	1.33	NA	NA	XXX
92081	26	A	Visual field examination(s)	0.36	0.11	0.14	0.11	0.14	0.01	0.48	0.51	0.48	0.51	XXX
92081	TC	A	Visual field examination(s)	0.00	0.85	0.81	NA	NA	0.01	0.86	0.82	NA	NA	XXX
92082		A	Visual field examination(s)	0.44	1.34	1.26	NA	NA	0.02	1.80	1.72	NA	NA	XXX
92082	26	A	Visual field examination(s)	0.44	0.14	0.18	0.14	0.18	0.01	0.59	0.63	0.59	0.63	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
92082	TC	A	Visual field examination(s)	0.00	1.20	1.08	NA	NA	0.01	1.21	1.09	NA	NA	XXX
92083		A	Visual field examination(s)	0.50	1.54	1.46	NA	NA	0.02	2.06	1.98	NA	NA	XXX
92083	26	A	Visual field examination(s)	0.50	0.17	0.21	0.17	0.21	0.01	0.68	0.72	0.68	0.72	XXX
92083	TC	A	Visual field examination(s)	0.00	1.37	1.25	NA	NA	0.01	1.38	1.26	NA	NA	XXX
92100		A	Serial tonometry exam(s)	0.92	1.26	1.33	0.28	0.34	0.02	2.20	2.27	1.22	1.28	XXX
92120		A	Tonography & eye evaluation	0.81	0.99	1.05	0.25	0.30	0.02	1.82	1.88	1.08	1.13	XXX
92130		A	Water provocation tonography	0.81	1.19	1.26	0.27	0.35	0.02	2.02	2.09	1.10	1.18	XXX
92135		A	Opthalmic dx imaging	0.35	0.80	0.79	NA	NA	0.02	1.17	1.16	NA	NA	XXX
92135	26	A	Opthalmic dx imaging	0.35	0.12	0.14	0.12	0.14	0.01	0.48	0.50	0.48	0.50	XXX
92135	TC	A	Opthalmic dx imaging	0.00	0.68	0.65	NA	NA	0.01	0.69	0.66	NA	NA	XXX
92136		A	Ophthalmic biometry	0.54	1.41	1.59	NA	NA	0.08	2.03	2.21	NA	NA	XXX
92136	26	A	Ophthalmic biometry	0.54	0.19	0.23	0.19	0.23	0.01	0.74	0.78	0.74	0.78	XXX
92136	TC	A	Ophthalmic biometry	0.00	1.22	1.36	NA	NA	0.07	1.29	1.43	NA	NA	XXX
92140		A	Glaucoma provocative tests	0.50	0.91	0.97	0.15	0.20	0.01	1.42	1.48	0.66	0.71	XXX
92225		A	Special eye exam, initial	0.38	0.18	0.21	0.12	0.15	0.01	0.57	0.60	0.51	0.54	XXX
92226		A	Special eye exam, subsequent	0.33	0.18	0.20	0.12	0.14	0.01	0.52	0.54	0.46	0.48	XXX
92230		A	Eye exam with photos	0.60	0.69	1.32	0.20	0.20	0.02	1.31	1.94	0.82	0.82	XXX
92235		A	Eye exam with photos	0.81	2.27	2.53	NA	NA	0.08	3.16	3.42	NA	NA	XXX
92235	26	A	Eye exam with photos	0.81	0.29	0.35	0.29	0.35	0.02	1.12	1.18	1.12	1.18	XXX
92235	TC	A	Eye exam with photos	0.00	1.98	2.18	NA	NA	0.06	2.04	2.24	NA	NA	XXX
92240		A	Icg angiography	1.10	4.43	5.70	NA	NA	0.09	5.62	6.89	NA	NA	XXX
92240	26	A	Icg angiography	1.10	0.40	0.48	0.40	0.48	0.03	1.53	1.61	1.53	1.61	XXX
92240	TC	A	Icg angiography	0.00	4.03	5.22	NA	NA	0.06	4.09	5.28	NA	NA	XXX
92250		A	Eye exam with photos	0.44	1.31	1.48	NA	NA	0.02	1.77	1.94	NA	NA	XXX
92250	26	A	Eye exam with photos	0.44	0.14	0.18	0.14	0.18	0.01	0.59	0.63	0.59	0.63	XXX
92250	TC	A	Eye exam with photos	0.00	1.16	1.30	NA	NA	0.01	1.17	1.31	NA	NA	XXX
92260		A	Ophthalmoscopy/dynamometry	0.20	0.19	0.24	0.07	0.09	0.01	0.40	0.45	0.28	0.30	XXX
92265		A	Eye muscle evaluation	0.81	0.99	1.37	NA	NA	0.06	1.86	2.24	NA	NA	XXX
92265	26	A	Eye muscle evaluation	0.81	0.23	0.27	0.23	0.27	0.04	1.08	1.12	1.08	1.12	XXX
92265	TC	A	Eye muscle evaluation	0.00	0.76	1.10	NA	NA	0.02	0.78	1.12	NA	NA	XXX
92270		A	Electro-oculography	0.81	1.41	1.50	NA	NA	0.05	2.27	2.36	NA	NA	XXX
92270	26	A	Electro-oculography	0.81	0.24	0.31	0.24	0.31	0.03	1.08	1.15	1.08	1.15	XXX
92270	TC	A	Electro-oculography	0.00	1.18	1.20	NA	NA	0.02	1.20	1.22	NA	NA	XXX
92275		A	Electroretinography	1.01	2.45	2.07	NA	NA	0.05	3.51	3.13	NA	NA	XXX
92275	26	A	Electroretinography	1.01	0.35	0.41	0.35	0.41	0.03	1.39	1.45	1.39	1.45	XXX
92275	TC	A	Electroretinography	0.00	2.10	1.66	NA	NA	0.02	2.12	1.68	NA	NA	XXX
92283		A	Color vision examination	0.17	1.00	0.88	NA	NA	0.02	1.19	1.07	NA	NA	XXX
92283	26	A	Color vision examination	0.17	0.05	0.07	0.05	0.07	0.01	0.23	0.25	0.23	0.25	XXX
92283	TC	A	Color vision examination	0.00	0.95	0.82	NA	NA	0.01	0.96	0.83	NA	NA	XXX
92284		A	Dark adaptation eye exam	0.24	1.23	1.73	NA	NA	0.02	1.49	1.99	NA	NA	XXX
92284	26	A	Dark adaptation eye exam	0.24	0.08	0.08	0.08	0.08	0.01	0.33	0.33	0.33	0.33	XXX
92284	TC	A	Dark adaptation eye exam	0.00	1.14	1.64	NA	NA	0.01	1.15	1.65	NA	NA	XXX
92285		A	Eye photography	0.20	0.81	0.95	NA	NA	0.02	1.03	1.17	NA	NA	XXX
92285	26	A	Eye photography	0.20	0.07	0.09	0.07	0.09	0.01	0.28	0.30	0.28	0.30	XXX
92285	TC	A	Eye photography	0.00	0.74	0.86	NA	NA	0.01	0.75	0.87	NA	NA	XXX
92286		A	Internal eye photography	0.66	2.14	2.83	NA	NA	0.04	2.84	3.53	NA	NA	XXX
92286	26	A	Internal eye photography	0.66	0.23	0.28	0.23	0.28	0.02	0.91	0.96	0.91	0.96	XXX
92286	TC	A	Internal eye photography	0.00	1.92	2.56	NA	NA	0.02	1.94	2.58	NA	NA	XXX
92287		A	Internal eye photography	0.81	1.95	2.28	0.29	0.31	0.02	2.78	3.11	1.12	1.14	XXX
92310		N	Contact lens fitting	1.17	1.05	1.10	0.26	0.40	0.04	2.26	2.31	1.47	1.61	XXX
92311		A	Contact lens fitting	1.08	1.28	1.14	0.31	0.34	0.03	2.39	2.25	1.42	1.45	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
92312		A	Contact lens fitting	1.26	1.48	1.18	0.34	0.46	0.03	2.77	2.47	1.63	1.75	XXX
92313		A	Contact lens fitting	0.92	1.46	1.16	0.32	0.30	0.02	2.40	2.10	1.26	1.24	XXX
92314		N	Prescription of contact lens	0.69	1.13	0.99	0.15	0.24	0.01	1.83	1.69	0.85	0.94	XXX
92315		A	Prescription of contact lens	0.45	1.33	0.97	0.13	0.15	0.01	1.79	1.43	0.59	0.61	XXX
92316		A	Prescription of contact lens	0.68	1.66	1.10	0.23	0.28	0.02	2.36	1.80	0.93	0.98	XXX
92317		A	Prescription of contact lens	0.45	1.43	1.06	0.13	0.15	0.01	1.89	1.52	0.59	0.61	XXX
92325		A	Modification of contact lens	0.00	0.84	0.51	NA	NA	0.01	0.85	0.52	NA	NA	XXX
92326		A	Replacement of contact lens	0.00	0.75	1.41	NA	NA	0.06	0.81	1.47	NA	NA	XXX
92340		N	Fitting of spectacles	0.37	0.44	0.64	0.08	0.13	0.01	0.82	1.02	0.46	0.51	XXX
92341		N	Fitting of spectacles	0.47	0.46	0.67	0.11	0.16	0.01	0.94	1.15	0.59	0.64	XXX
92342		N	Fitting of spectacles	0.53	0.48	0.69	0.12	0.19	0.01	1.02	1.23	0.66	0.73	XXX
92352		B	Special spectacles fitting	0.37	0.56	0.65	0.08	0.13	0.01	0.94	1.03	0.46	0.51	XXX
92353		B	Special spectacles fitting	0.50	0.59	0.70	0.11	0.17	0.02	1.11	1.22	0.63	0.69	XXX
92354		B	Special spectacles fitting	0.00	0.28	6.74	NA	NA	0.10	0.38	6.84	NA	NA	XXX
92355		B	Special spectacles fitting	0.00	0.44	3.37	NA	NA	0.01	0.45	3.38	NA	NA	XXX
92358		B	Eye prosthesis service	0.00	0.23	0.79	NA	NA	0.05	0.28	0.84	NA	NA	XXX
92370		N	Repair & adjust spectacles	0.32	0.39	0.51	0.07	0.12	0.02	0.73	0.85	0.41	0.46	XXX
92371		B	Repair & adjust spectacles	0.00	0.24	0.53	NA	NA	0.02	0.26	0.55	NA	NA	XXX
92502		A	Ear and throat examination	1.51	NA	NA	0.76	1.02	0.05	NA	NA	2.32	2.58	000
92504		A	Ear microscopy examination	0.18	0.55	0.51	0.05	0.08	0.01	0.74	0.70	0.24	0.27	XXX
92506		A	Speech/hearing evaluation	0.86	3.25	2.76	0.24	0.36	0.03	4.14	3.65	1.13	1.25	XXX
92507		A	Speech/hearing therapy	0.52	1.18	1.13	0.14	0.21	0.02	1.72	1.67	0.68	0.75	XXX
92508		A	Speech/hearing therapy	0.26	0.52	0.51	0.08	0.11	0.01	0.79	0.78	0.35	0.38	XXX
92511		A	Nasopharyngoscopy	0.84	2.89	3.21	0.60	0.74	0.03	3.76	4.08	1.47	1.61	000
92512		A	Nasal function studies	0.55	0.93	1.09	0.15	0.17	0.02	1.50	1.66	0.72	0.74	XXX
92516		A	Facial nerve function test	0.43	1.14	1.19	0.12	0.20	0.01	1.58	1.63	0.56	0.64	XXX
92520		A	Laryngeal function studies	0.75	0.93	0.62	0.24	0.35	0.03	1.71	1.40	1.02	1.13	XXX
92526		A	Oral function therapy	0.55	1.68	1.65	0.16	0.19	0.02	2.25	2.22	0.73	0.76	XXX
92541		A	Spontaneous nystagmus test	0.40	1.14	1.06	NA	NA	0.04	1.58	1.50	NA	NA	XXX
92541	26	A	Spontaneous nystagmus test	0.40	0.11	0.17	0.11	0.17	0.02	0.53	0.59	0.53	0.59	XXX
92541	TC	A	Spontaneous nystagmus test	0.00	1.02	0.89	NA	NA	0.02	1.04	0.91	NA	NA	XXX
92542		A	Positional nystagmus test	0.33	1.28	1.18	NA	NA	0.03	1.64	1.54	NA	NA	XXX
92542	26	A	Positional nystagmus test	0.33	0.09	0.14	0.09	0.14	0.01	0.43	0.48	0.43	0.48	XXX
92542	TC	A	Positional nystagmus test	0.00	1.18	1.03	NA	NA	0.02	1.20	1.05	NA	NA	XXX
92543		A	Caloric vestibular test	0.10	0.65	0.59	NA	NA	0.02	0.77	0.71	NA	NA	XXX
92543	26	A	Caloric vestibular test	0.10	0.03	0.05	0.03	0.05	0.01	0.14	0.16	0.14	0.16	XXX
92543	TC	A	Caloric vestibular test	0.00	0.62	0.55	NA	NA	0.01	0.63	0.56	NA	NA	XXX
92544		A	Optokinetic nystagmus test	0.26	1.04	0.94	NA	NA	0.03	1.33	1.23	NA	NA	XXX
92544	26	A	Optokinetic nystagmus test	0.26	0.07	0.11	0.07	0.11	0.01	0.34	0.38	0.34	0.38	XXX
92544	TC	A	Optokinetic nystagmus test	0.00	0.96	0.83	NA	NA	0.02	0.98	0.85	NA	NA	XXX
92545		A	Oscillating tracking test	0.23	1.01	0.85	NA	NA	0.03	1.27	1.11	NA	NA	XXX
92545	26	A	Oscillating tracking test	0.23	0.06	0.10	0.06	0.10	0.01	0.30	0.34	0.30	0.34	XXX
92545	TC	A	Oscillating tracking test	0.00	0.95	0.76	NA	NA	0.02	0.97	0.78	NA	NA	XXX
92546		A	Sinusoidal rotational test	0.29	1.87	1.96	NA	NA	0.03	2.19	2.28	NA	NA	XXX
92546	26	A	Sinusoidal rotational test	0.29	0.08	0.12	0.08	0.12	0.01	0.38	0.42	0.38	0.42	XXX
92546	TC	A	Sinusoidal rotational test	0.00	1.78	1.84	NA	NA	0.02	1.80	1.86	NA	NA	XXX
92547		A	Supplemental electrical test	0.00	0.11	0.09	NA	NA	0.06	0.17	0.15	NA	NA	ZZZ
92548		A	Posturography	0.50	1.68	2.12	NA	NA	0.15	2.33	2.77	NA	NA	XXX
92548	26	A	Posturography	0.50	0.14	0.23	0.14	0.23	0.02	0.66	0.75	0.66	0.75	XXX
92548	TC	A	Posturography	0.00	1.54	1.89	NA	NA	0.13	1.67	2.02	NA	NA	XXX
92552		A	Pure tone audiometry, air	0.00	0.56	0.47	NA	NA	0.04	0.60	0.51	NA	NA	XXX
92553		A	Audiometry, air & bone	0.00	0.70	0.67	NA	NA	0.06	0.76	0.73	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
92555		A	Speech threshold audiometry	0.00	0.38	0.38	NA	NA	0.04	0.42	0.42	NA	NA	XXX
92556		A	Speech audiometry, complete	0.00	0.51	0.56	NA	NA	0.06	0.57	0.62	NA	NA	XXX
92557		A	Comprehensive hearing test	0.00	1.25	1.21	NA	NA	0.12	1.37	1.33	NA	NA	XXX
92561		A	Bekesy audiometry, diagnosis	0.00	0.76	0.73	NA	NA	0.06	0.82	0.79	NA	NA	XXX
92562		A	Loudness balance test	0.00	0.67	0.48	NA	NA	0.04	0.71	0.52	NA	NA	XXX
92563		A	Tone decay hearing test	0.00	0.51	0.41	NA	NA	0.04	0.55	0.45	NA	NA	XXX
92564		A	Sisi hearing test	0.00	0.49	0.48	NA	NA	0.05	0.54	0.53	NA	NA	XXX
92565		A	Stenger test, pure tone	0.00	0.26	0.37	NA	NA	0.04	0.30	0.41	NA	NA	XXX
92567		A	Tympanometry	0.00	0.49	0.51	NA	NA	0.06	0.55	0.57	NA	NA	XXX
92568		A	Acoustic refl threshold tst	0.00	0.15	0.32	NA	NA	0.04	0.19	0.36	NA	NA	XXX
92569		A	Acoustic reflex decay test	0.00	0.15	0.35	NA	NA	0.04	0.19	0.39	NA	NA	XXX
92571		A	Filtered speech hearing test	0.00	0.40	0.39	NA	NA	0.04	0.44	0.43	NA	NA	XXX
92572		A	Staggered spondaic word test	0.00	0.60	0.22	NA	NA	0.01	0.61	0.23	NA	NA	XXX
92573		A	Lombard test	0.00	0.49	0.39	NA	NA	0.04	0.53	0.43	NA	NA	XXX
92575		A	Sensorineural acuity test	0.00	1.09	0.50	NA	NA	0.02	1.11	0.52	NA	NA	XXX
92576		A	Synthetic sentence test	0.00	0.53	0.46	NA	NA	0.05	0.58	0.51	NA	NA	XXX
92577		A	Stenger test, speech	0.00	0.27	0.61	NA	NA	0.07	0.34	0.68	NA	NA	XXX
92579		A	Visual audiometry (vra)	0.00	0.83	0.76	NA	NA	0.06	0.89	0.82	NA	NA	XXX
92582		A	Conditioning play audiometry	0.00	1.07	0.82	NA	NA	0.06	1.13	0.88	NA	NA	XXX
92583		A	Select picture audiometry	0.00	0.69	0.84	NA	NA	0.08	0.77	0.92	NA	NA	XXX
92584		A	Electrocochleography	0.00	1.25	2.17	NA	NA	0.21	1.46	2.38	NA	NA	XXX
92585		A	Auditor evoke potent, compre	0.50	1.97	2.05	NA	NA	0.17	2.64	2.72	NA	NA	XXX
92585	26	A	Auditor evoke potent, compre	0.50	0.15	0.20	0.15	0.20	0.03	0.68	0.73	0.68	0.73	XXX
92585	TC	A	Auditor evoke potent, compre	0.00	1.82	1.85	NA	NA	0.14	1.96	1.99	NA	NA	XXX
92586		A	Auditor evoke potent, limit	0.00	1.39	1.74	NA	NA	0.14	1.53	1.88	NA	NA	XXX
92587		A	Evoked auditory test	0.13	0.61	1.18	NA	NA	0.12	0.86	1.43	NA	NA	XXX
92587	26	A	Evoked auditory test	0.13	0.03	0.05	0.03	0.05	0.01	0.17	0.19	0.17	0.19	XXX
92587	TC	A	Evoked auditory test	0.00	0.57	1.13	NA	NA	0.11	0.68	1.24	NA	NA	XXX
92588		A	Evoked auditory test	0.36	1.03	1.48	NA	NA	0.14	1.53	1.98	NA	NA	XXX
92588	26	A	Evoked auditory test	0.36	0.10	0.15	0.10	0.15	0.01	0.47	0.52	0.47	0.52	XXX
92588	TC	A	Evoked auditory test	0.00	0.93	1.34	NA	NA	0.13	1.06	1.47	NA	NA	XXX
92596		A	Ear protector evaluation	0.00	0.93	0.68	NA	NA	0.06	0.99	0.74	NA	NA	XXX
92597		A	Oral speech device eval	0.86	1.67	1.69	0.24	0.40	0.03	2.56	2.58	1.13	1.29	XXX
92601		A	Cochlear implt f/up exam < 7	0.00	4.82	3.84	NA	NA	0.07	4.89	3.91	NA	NA	XXX
92602		A	Reprogram cochlear implt < 7	0.00	3.31	2.62	NA	NA	0.07	3.38	2.69	NA	NA	XXX
92603		A	Cochlear implt f/up exam 7 >	0.00	3.13	2.40	NA	NA	0.07	3.20	2.47	NA	NA	XXX
92604		A	Reprogram cochlear implt 7 >	0.00	2.07	1.53	NA	NA	0.07	2.14	1.60	NA	NA	XXX
92607		A	Ex for speech device rx, 1hr	0.00	4.20	3.37	NA	NA	0.05	4.25	3.42	NA	NA	XXX
92608		A	Ex for speech device rx addl	0.00	0.83	0.62	NA	NA	0.05	0.88	0.67	NA	NA	XXX
92609		A	Use of speech device service	0.00	2.27	1.76	NA	NA	0.04	2.31	1.80	NA	NA	XXX
92610		A	Evaluate swallowing function	0.00	1.61	2.98	NA	NA	0.08	1.69	3.06	NA	NA	XXX
92611		A	Motion fluoroscopy/swallow	0.00	1.93	3.06	NA	NA	0.08	2.01	3.14	NA	NA	XXX
92612		A	Endoscopy swallow tst (fees)	1.27	2.71	2.74	0.35	0.58	0.04	4.02	4.05	1.66	1.89	XXX
92613		A	Endoscopy swallow tst (fees)	0.71	0.22	0.36	0.22	0.35	0.05	0.98	1.12	0.98	1.11	XXX
92614		A	Laryngoscopic sensory test	1.27	2.21	2.44	0.35	0.58	0.04	3.52	3.75	1.66	1.89	XXX
92615		A	Eval laryngoscopy sense tst	0.63	0.17	0.31	0.17	0.31	0.05	0.85	0.99	0.85	0.99	XXX
92616		A	Fees w/laryngeal sense test	1.88	2.88	3.27	0.51	0.87	0.06	4.82	5.21	2.45	2.81	XXX
92617		A	Interprt fees/laryngeal test	0.79	0.22	0.39	0.22	0.39	0.05	1.06	1.23	1.06	1.23	XXX
92620		A	Auditory function, 60 min	0.00	1.85	1.32	NA	NA	0.06	1.91	1.38	NA	NA	XXX
92621		A	Auditory function, + 15 min	0.00	0.40	0.29	NA	NA	0.06	0.46	0.35	NA	NA	ZZZ
92625		A	Tinnitus assessment	0.00	1.80	1.29	NA	NA	0.06	1.86	1.35	NA	NA	XXX
92626		A	Eval aud rehab status	0.00	1.83	2.11	NA	NA	0.06	1.89	2.17	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
92627		A	Eval aud status rehab add-on	0.00	0.42	0.52	NA	NA	0.02	0.44	0.54	NA	NA	ZZZ
92950		A	Heart/lung resuscitation cpr	3.79	3.22	3.96	0.75	0.92	0.28	7.29	8.03	4.82	4.99	000
92953		A	Temporary external pacing	0.23	NA	NA	0.07	0.07	0.02	NA	NA	0.32	0.32	000
92960		A	Cardioversion electric, ext	2.25	4.49	5.87	1.50	1.25	0.07	6.81	8.19	3.82	3.57	000
92961		A	Cardioversion, electric, int	4.59	NA	NA	2.55	2.21	0.29	NA	NA	7.43	7.09	000
92970		A	Cardioassist, internal	3.51	NA	NA	1.65	1.21	0.16	NA	NA	5.32	4.88	000
92971		A	Cardioassist, external	1.77	NA	NA	1.10	0.91	0.06	NA	NA	2.93	2.74	000
92973		A	Percut coronary thrombectomy	3.28	NA	NA	1.83	1.43	0.23	NA	NA	5.34	4.94	ZZZ
92974		A	Cath place, cardio brachytx	3.00	NA	NA	1.71	1.31	0.21	NA	NA	4.92	4.52	ZZZ
92975		A	Dissolve clot, heart vessel	7.24	NA	NA	3.96	3.11	0.50	NA	NA	11.70	10.85	000
92977		A	Dissolve clot, heart vessel	0.00	1.75	6.49	NA	NA	0.46	2.21	6.95	NA	NA	XXX
92978		A	Intravasc us, heart add-on	1.80	1.00	4.21	NA	NA	0.30	3.10	6.31	NA	NA	ZZZ
92978	26	A	Intravasc us, heart add-on	1.80	1.00	0.78	1.00	0.78	0.06	2.86	2.64	2.86	2.64	ZZZ
92978	TC	A	Intravasc us, heart add-on	0.00	0.00	3.43	NA	NA	0.24	0.24	3.67	NA	NA	ZZZ
92979		A	Intravasc us, heart add-on	1.44	0.80	2.35	NA	NA	0.19	2.43	3.98	NA	NA	ZZZ
92979	26	A	Intravasc us, heart add-on	1.44	0.80	0.62	0.80	0.62	0.06	2.30	2.12	2.30	2.12	ZZZ
92979	TC	A	Intravasc us, heart add-on	0.00	0.00	1.73	NA	NA	0.13	0.13	1.86	NA	NA	ZZZ
92980		A	Insert intracoronary stent	14.82	NA	NA	8.49	6.68	1.03	NA	NA	24.34	22.53	000
92981		A	Insert intracoronary stent	4.16	NA	NA	2.33	1.81	0.29	NA	NA	6.78	6.26	ZZZ
92982		A	Coronary artery dilation	10.96	NA	NA	6.34	4.99	0.76	NA	NA	18.06	16.71	000
92984		A	Coronary artery dilation	2.97	NA	NA	1.65	1.28	0.21	NA	NA	4.83	4.46	ZZZ
92986		A	Revision of aortic valve	22.64	NA	NA	16.03	12.90	1.51	NA	NA	40.18	37.05	090
92987		A	Revision of mitral valve	23.42	NA	NA	16.45	13.30	1.59	NA	NA	41.46	38.31	090
92990		A	Revision of pulmonary valve	18.06	NA	NA	11.35	10.20	1.20	NA	NA	30.61	29.46	090
92995		A	Coronary atherectomy	12.07	NA	NA	6.96	5.47	0.84	NA	NA	19.87	18.38	000
92996		A	Coronary atherectomy add-on	3.26	NA	NA	1.83	1.41	0.10	NA	NA	5.19	4.77	ZZZ
92997		A	Pul art balloon repr, percut	11.98	NA	NA	5.25	4.94	0.40	NA	NA	17.63	17.32	000
92998		A	Pul art balloon repr, percut	5.99	NA	NA	2.78	2.35	0.28	NA	NA	9.05	8.62	ZZZ
93000		A	Electrocardiogram, complete	0.17	0.35	0.47	NA	NA	0.03	0.55	0.67	NA	NA	XXX
93005		A	Electrocardiogram, tracing	0.00	0.28	0.41	NA	NA	0.02	0.30	0.43	NA	NA	XXX
93010		A	Electrocardiogram report	0.17	0.07	0.06	0.07	0.06	0.01	0.25	0.24	0.25	0.24	XXX
93012		A	Transmission of ecg	0.00	1.60	4.92	NA	NA	0.18	1.78	5.10	NA	NA	XXX
93014		A	Report on transmitted ecg	0.52	0.21	0.20	0.21	0.20	0.02	0.75	0.74	0.75	0.74	XXX
93015		A	Cardiovascular stress test	0.75	1.96	1.96	NA	NA	0.14	2.85	2.85	NA	NA	XXX
93016		A	Cardiovascular stress test	0.45	0.23	0.19	0.23	0.19	0.02	0.70	0.66	0.70	0.66	XXX
93017		A	Cardiovascular stress test	0.00	1.58	1.66	NA	NA	0.11	1.69	1.77	NA	NA	XXX
93018		A	Cardiovascular stress test	0.30	0.15	0.12	0.15	0.12	0.01	0.46	0.43	0.46	0.43	XXX
93024		A	Cardiac drug stress test	1.17	2.46	1.79	NA	NA	0.12	3.75	3.08	NA	NA	XXX
93024	26	A	Cardiac drug stress test	1.17	0.60	0.49	0.60	0.49	0.04	1.81	1.70	1.81	1.70	XXX
93024	TC	A	Cardiac drug stress test	0.00	1.87	1.31	NA	NA	0.08	1.95	1.39	NA	NA	XXX
93025		A	Microvolt t-wave assess	0.75	4.00	6.71	NA	NA	0.14	4.89	7.60	NA	NA	XXX
93025	26	A	Microvolt t-wave assess	0.75	0.39	0.32	0.39	0.32	0.03	1.17	1.10	1.17	1.10	XXX
93025	TC	A	Microvolt t-wave assess	0.00	3.61	6.39	NA	NA	0.11	3.72	6.50	NA	NA	XXX
93040		A	Rhythm ECG with report	0.16	0.19	0.20	NA	NA	0.02	0.37	0.38	NA	NA	XXX
93041		A	Rhythm ECG, tracing	0.00	0.15	0.15	NA	NA	0.01	0.16	0.16	NA	NA	XXX
93042		A	Rhythm ECG, report	0.16	0.05	0.05	0.05	0.05	0.01	0.22	0.22	0.22	0.22	XXX
93224		A	ECG monitor/report, 24 hrs	0.52	2.01	3.22	NA	NA	0.24	2.77	3.98	NA	NA	XXX
93225		A	ECG monitor/record, 24 hrs	0.00	1.09	1.20	NA	NA	0.08	1.17	1.28	NA	NA	XXX
93226		A	ECG monitor/report, 24 hrs	0.00	0.63	1.80	NA	NA	0.14	0.77	1.94	NA	NA	XXX
93227		A	ECG monitor/review, 24 hrs	0.52	0.28	0.21	0.28	0.21	0.02	0.82	0.75	0.82	0.75	XXX
93230		A	ECG monitor/report, 24 hrs	0.52	1.81	3.38	NA	NA	0.26	2.59	4.16	NA	NA	XXX
93231		A	Ecg monitor/record, 24 hrs	0.00	0.95	1.38	NA	NA	0.11	1.06	1.49	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
93232		A	ECG monitor/report, 24 hrs	0.00	0.62	1.80	NA	NA	0.13	0.75	1.93	NA	NA	XXX
93233		A	ECG monitor/review, 24 hrs	0.52	0.24	0.20	0.24	0.20	0.02	0.78	0.74	0.78	0.74	XXX
93235		A	ECG monitor/report, 24 hrs	0.45	0.22	2.15	NA	NA	0.16	0.83	2.76	NA	NA	XXX
93236		A	ECG monitor/report, 24 hrs	0.00	0.00	1.97	NA	NA	0.14	0.14	2.11	NA	NA	XXX
93237		A	ECG monitor/review, 24 hrs	0.45	0.22	0.18	0.22	0.18	0.02	0.69	0.65	0.69	0.65	XXX
93268		A	ECG record/review	0.52	0.83	5.80	NA	NA	0.28	1.63	6.60	NA	NA	XXX
93270		A	ECG recording	0.00	0.31	1.01	NA	NA	0.08	0.39	1.09	NA	NA	XXX
93271		A	Ecg/monitoring and analysis	0.00	1.98	5.02	NA	NA	0.18	2.16	5.20	NA	NA	XXX
93272		A	Ecg/review, interpret only	0.52	0.24	0.20	0.24	0.20	0.02	0.78	0.74	0.78	0.74	XXX
93278		A	ECG/signal-averaged	0.25	0.59	1.09	NA	NA	0.12	0.96	1.46	NA	NA	XXX
93278	26	A	ECG/signal-averaged	0.25	0.10	0.10	0.10	0.10	0.01	0.36	0.36	0.36	0.36	XXX
93278	TC	A	ECG/signal-averaged	0.00	0.49	0.99	NA	NA	0.11	0.60	1.10	NA	NA	XXX
93303		A	Echo transthoracic	1.30	4.70	4.44	NA	NA	0.27	6.27	6.01	NA	NA	XXX
93303	26	A	Echo transthoracic	1.30	0.58	0.51	0.58	0.51	0.04	1.92	1.85	1.92	1.85	XXX
93303	TC	A	Echo transthoracic	0.00	4.12	3.93	NA	NA	0.23	4.35	4.16	NA	NA	XXX
93304		A	Echo transthoracic	0.75	3.22	2.48	NA	NA	0.15	4.12	3.38	NA	NA	XXX
93304	26	A	Echo transthoracic	0.75	0.32	0.29	0.32	0.29	0.02	1.09	1.06	1.09	1.06	XXX
93304	TC	A	Echo transthoracic	0.00	2.90	2.19	NA	NA	0.13	3.03	2.32	NA	NA	XXX
93307		A	Echo exam of heart	0.92	3.84	4.13	NA	NA	0.26	5.02	5.31	NA	NA	XXX
93307	26	A	Echo exam of heart	0.92	0.47	0.38	0.47	0.38	0.03	1.42	1.33	1.42	1.33	XXX
93307	TC	A	Echo exam of heart	0.00	3.36	3.74	NA	NA	0.23	3.59	3.97	NA	NA	XXX
93308		A	Echo exam of heart	0.53	2.70	2.29	NA	NA	0.15	3.38	2.97	NA	NA	XXX
93308	26	A	Echo exam of heart	0.53	0.28	0.22	0.28	0.22	0.02	0.83	0.77	0.83	0.77	XXX
93308	TC	A	Echo exam of heart	0.00	2.41	2.07	NA	NA	0.13	2.54	2.20	NA	NA	XXX
93312		A	Echo transesophageal	2.20	7.67	5.35	NA	NA	0.37	10.24	7.92	NA	NA	XXX
93312	26	A	Echo transesophageal	2.20	1.03	0.85	1.03	0.85	0.08	3.31	3.13	3.31	3.13	XXX
93312	TC	A	Echo transesophageal	0.00	6.64	4.50	NA	NA	0.29	6.93	4.79	NA	NA	XXX
93313		A	Echo transesophageal	0.95	NA	NA	0.14	0.19	0.06	NA	NA	1.15	1.20	XXX
93314		A	Echo transesophageal	1.25	7.37	5.04	NA	NA	0.33	8.95	6.62	NA	NA	XXX
93314	26	A	Echo transesophageal	1.25	0.58	0.50	0.58	0.50	0.04	1.87	1.79	1.87	1.79	XXX
93314	TC	A	Echo transesophageal	0.00	6.79	4.54	NA	NA	0.29	7.08	4.83	NA	NA	XXX
93315	26	A	Echo transesophageal	2.78	1.35	1.10	1.35	1.10	0.09	4.22	3.97	4.22	3.97	XXX
93316		A	Echo transesophageal	0.95	NA	NA	0.26	0.25	0.05	NA	NA	1.26	1.25	XXX
93317	26	A	Echo transesophageal	1.83	0.79	0.70	0.79	0.70	0.08	2.70	2.61	2.70	2.61	XXX
93318	26	A	Echo transesophageal intraop	2.20	0.90	0.59	0.90	0.59	0.14	3.24	2.93	3.24	2.93	XXX
93320		A	Doppler echo exam, heart	0.38	1.72	1.83	NA	NA	0.13	2.23	2.34	NA	NA	ZZZ
93320	26	A	Doppler echo exam, heart	0.38	0.20	0.16	0.20	0.16	0.01	0.59	0.55	0.59	0.55	ZZZ
93320	TC	A	Doppler echo exam, heart	0.00	1.53	1.67	NA	NA	0.12	1.65	1.79	NA	NA	ZZZ
93321		A	Doppler echo exam, heart	0.15	0.63	1.04	NA	NA	0.09	0.87	1.28	NA	NA	ZZZ
93321	26	A	Doppler echo exam, heart	0.15	0.08	0.07	0.08	0.07	0.01	0.24	0.23	0.24	0.23	ZZZ
93321	TC	A	Doppler echo exam, heart	0.00	0.55	0.97	NA	NA	0.08	0.63	1.05	NA	NA	ZZZ
93325		A	Doppler color flow add-on	0.07	0.68	2.38	NA	NA	0.22	0.97	2.67	NA	NA	ZZZ
93325	26	A	Doppler color flow add-on	0.07	0.04	0.03	0.04	0.03	0.01	0.12	0.11	0.12	0.11	ZZZ
93325	TC	A	Doppler color flow add-on	0.00	0.65	2.35	NA	NA	0.21	0.86	2.56	NA	NA	ZZZ
93350		A	Echo transthoracic	1.48	5.24	3.07	NA	NA	0.18	6.90	4.73	NA	NA	XXX
93350	26	A	Echo transthoracic	1.48	0.79	0.63	0.79	0.63	0.05	2.32	2.16	2.32	2.16	XXX
93350	TC	A	Echo transthoracic	0.00	4.45	2.44	NA	NA	0.13	4.58	2.57	NA	NA	XXX
93501		A	Right heart catheterization	3.02	23.45	19.44	NA	NA	1.26	27.73	23.72	NA	NA	000
93501	26	A	Right heart catheterization	3.02	1.65	1.28	1.65	1.28	0.21	4.88	4.51	4.88	4.51	000
93501	TC	A	Right heart catheterization	0.00	21.80	18.16	NA	NA	1.05	22.85	19.21	NA	NA	000
93503		A	Insert/place heart catheter	2.91	NA	NA	0.48	0.63	0.20	NA	NA	3.59	3.74	000
93505		A	Biopsy of heart lining	4.37	25.50	9.13	NA	NA	0.46	30.33	13.96	NA	NA	000

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
93505	26	A	Biopsy of heart lining	4.37	2.39	1.86	2.39	1.86	0.30	7.06	6.53	7.06	6.53	000
93505	TC	A	Biopsy of heart lining	0.00	23.11	7.27	NA	NA	0.16	23.27	7.43	NA	NA	000
93508		A	Cath placement, angiography	4.09	18.76	15.74	NA	NA	0.93	23.78	20.76	NA	NA	000
93508	26	A	Cath placement, angiography	4.09	2.28	2.14	2.28	2.14	0.28	6.65	6.51	6.65	6.51	000
93508	TC	A	Cath placement, angiography	0.00	16.47	13.60	NA	NA	0.65	17.12	14.25	NA	NA	000
93510		A	Left heart catheterization	4.32	18.95	34.17	NA	NA	2.61	25.88	41.10	NA	NA	000
93510	26	A	Left heart catheterization	4.32	2.40	2.24	2.40	2.24	0.30	7.02	6.86	7.02	6.86	000
93510	TC	A	Left heart catheterization	0.00	16.55	31.93	NA	NA	2.31	18.86	34.24	NA	NA	000
93511		A	Left heart catheterization	5.02	3.30	29.72	NA	NA	2.59	10.91	37.33	NA	NA	000
93511	26	A	Left heart catheterization	5.02	2.71	2.52	2.71	2.52	0.35	8.08	7.89	8.08	7.89	000
93511	TC	A	Left heart catheterization	0.00	0.59	27.20	NA	NA	2.24	2.83	29.44	NA	NA	000
93514	26	A	Left heart catheterization	7.04	3.29	3.17	3.29	3.17	0.49	10.82	10.70	10.82	10.70	000
93524		A	Left heart catheterization	6.94	4.40	38.84	NA	NA	3.43	14.77	49.21	NA	NA	000
93524	26	A	Left heart catheterization	6.94	3.80	3.34	3.80	3.34	0.48	11.22	10.76	11.22	10.76	000
93524	TC	A	Left heart catheterization	0.00	0.60	35.51	NA	NA	2.95	3.55	38.46	NA	NA	000
93526		A	Rt & Lt heart catheters	5.98	34.54	47.07	NA	NA	3.46	43.98	56.51	NA	NA	000
93526	26	A	Rt & Lt heart catheters	5.98	3.32	2.95	3.32	2.95	0.42	9.72	9.35	9.72	9.35	000
93526	TC	A	Rt & Lt heart catheters	0.00	31.22	44.13	NA	NA	3.04	34.26	47.17	NA	NA	000
93527		A	Rt & Lt heart catheters	7.27	4.66	39.01	NA	NA	3.46	15.39	49.74	NA	NA	000
93527	26	A	Rt & Lt heart catheters	7.27	4.06	3.51	4.06	3.51	0.51	11.84	11.29	11.84	11.29	000
93527	TC	A	Rt & Lt heart catheters	0.00	0.60	35.51	NA	NA	2.95	3.55	38.46	NA	NA	000
93528		A	Rt & Lt heart catheters	8.99	5.37	39.73	NA	NA	3.57	17.93	52.29	NA	NA	000
93528	26	A	Rt & Lt heart catheters	8.99	4.78	4.23	4.78	4.23	0.62	14.39	13.84	14.39	13.84	000
93528	TC	A	Rt & Lt heart catheters	0.00	0.59	35.50	NA	NA	2.95	3.54	38.45	NA	NA	000
93529		A	Rt, lt heart catheterization	4.79	3.28	37.89	NA	NA	3.28	11.35	45.96	NA	NA	000
93529	26	A	Rt, lt heart catheterization	4.79	2.68	2.38	2.68	2.38	0.33	7.80	7.50	7.80	7.50	000
93529	TC	A	Rt, lt heart catheterization	0.00	0.60	35.51	NA	NA	2.95	3.55	38.46	NA	NA	000
93530		A	Rt heart cath, congenital	4.22	2.42	14.77	NA	NA	1.34	7.98	20.33	NA	NA	000
93530	26	A	Rt heart cath, congenital	4.22	1.88	1.93	1.88	1.93	0.29	6.39	6.44	6.39	6.44	000
93530	TC	A	Rt heart cath, congenital	0.00	0.54	12.85	NA	NA	1.05	1.59	13.90	NA	NA	000
93531		A	R & l heart cath, congenital	8.34	4.34	40.10	NA	NA	3.62	16.30	52.06	NA	NA	000
93531	26	A	R & l heart cath, congenital	8.34	3.80	3.64	3.80	3.64	0.58	12.72	12.56	12.72	12.56	000
93531	TC	A	R & l heart cath, congenital	0.00	0.55	36.46	NA	NA	3.04	3.59	39.50	NA	NA	000
93532	26	A	R & l heart cath, congenital	9.99	4.26	4.26	4.26	4.26	0.69	14.94	14.94	14.94	14.94	000
93533	26	A	R & l heart cath, congenital	6.69	3.09	2.87	3.09	2.87	0.47	10.25	10.03	10.25	10.03	000
93539		A	Injection, cardiac cath	0.40	NA	NA	0.22	0.18	0.01	NA	NA	0.63	0.59	000
93540		A	Injection, cardiac cath	0.43	NA	NA	0.24	0.19	0.01	NA	NA	0.68	0.63	000
93541		A	Injection for lung angiogram	0.29	NA	NA	0.16	0.12	0.01	NA	NA	0.46	0.42	000
93542		A	Injection for heart x-rays	0.29	NA	NA	0.16	0.12	0.01	NA	NA	0.46	0.42	000
93543		A	Injection for heart x-rays	0.29	NA	NA	0.16	0.12	0.01	NA	NA	0.46	0.42	000
93544		A	Injection for aortography	0.25	NA	NA	0.14	0.11	0.01	NA	NA	0.40	0.37	000
93545		A	Inject for coronary x-rays	0.40	NA	NA	0.22	0.18	0.01	NA	NA	0.63	0.59	000
93555		A	Imaging, cardiac cath	0.81	0.66	5.12	NA	NA	0.37	1.84	6.30	NA	NA	XXX
93555	26	A	Imaging, cardiac cath	0.81	0.45	0.35	0.45	0.35	0.03	1.29	1.19	1.29	1.19	XXX
93555	TC	A	Imaging, cardiac cath	0.00	0.21	4.77	NA	NA	0.34	0.55	5.11	NA	NA	XXX
93556		A	Imaging, cardiac cath	0.83	0.95	7.92	NA	NA	0.54	2.32	9.29	NA	NA	XXX
93556	26	A	Imaging, cardiac cath	0.83	0.46	0.36	0.46	0.36	0.03	1.32	1.22	1.32	1.22	XXX
93556	TC	A	Imaging, cardiac cath	0.00	0.49	7.56	NA	NA	0.51	1.00	8.07	NA	NA	XXX
93561		A	Cardiac output measurement	0.50	0.14	0.55	NA	NA	0.08	0.72	1.13	NA	NA	000
93561	26	A	Cardiac output measurement	0.50	0.14	0.16	0.14	0.16	0.02	0.66	0.68	0.66	0.68	000
93561	TC	A	Cardiac output measurement	0.00	0.00	0.39	NA	NA	0.06	0.06	0.45	NA	NA	000

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
93562		A	Cardiac output measurement	0.16	0.03	0.29	NA	NA	0.05	0.24	0.50	NA	NA	000
93562	26	A	Cardiac output measurement	0.16	0.03	0.05	0.03	0.05	0.01	0.20	0.22	0.20	0.22	000
93562	TC	A	Cardiac output measurement	0.00	0.00	0.24	NA	NA	0.04	0.04	0.28	NA	NA	000
93571		A	Heart flow reserve measure	1.80	1.00	4.19	NA	NA	0.30	3.10	6.29	NA	NA	ZZZ
93571	26	A	Heart flow reserve measure	1.80	1.00	0.76	1.00	0.76	0.06	2.86	2.62	2.86	2.62	ZZZ
93571	TC	A	Heart flow reserve measure	0.00	0.00	3.43	NA	NA	0.24	0.24	3.67	NA	NA	ZZZ
93572	26	A	Heart flow reserve measure	1.44	0.75	0.56	0.75	0.56	0.04	2.23	2.04	2.23	2.04	ZZZ
93580		A	Transcath closure of asd	17.97	NA	NA	9.78	8.00	1.25	NA	NA	29.00	27.22	000
93581		A	Transcath closure of vsd	24.39	NA	NA	13.45	10.43	1.71	NA	NA	39.55	36.53	000
93600		A	Bundle of His recording	2.12	1.11	2.37	NA	NA	0.29	3.52	4.78	NA	NA	000
93600	26	A	Bundle of His recording	2.12	1.11	0.90	1.11	0.90	0.16	3.39	3.18	3.39	3.18	000
93600	TC	A	Bundle of His recording	0.00	0.00	1.47	NA	NA	0.13	0.13	1.60	NA	NA	000
93602		A	Intra-atrial recording	2.12	1.10	1.72	NA	NA	0.24	3.46	4.08	NA	NA	000
93602	26	A	Intra-atrial recording	2.12	1.10	0.89	1.10	0.89	0.17	3.39	3.18	3.39	3.18	000
93602	TC	A	Intra-atrial recording	0.00	0.00	0.83	NA	NA	0.07	0.07	0.90	NA	NA	000
93603		A	Right ventricular recording	2.12	1.09	2.14	NA	NA	0.29	3.50	4.55	NA	NA	000
93603	26	A	Right ventricular recording	2.12	1.09	0.88	1.09	0.88	0.18	3.39	3.18	3.39	3.18	000
93603	TC	A	Right ventricular recording	0.00	0.00	1.26	NA	NA	0.11	0.11	1.37	NA	NA	000
93609		A	Map tachycardia, add-on	4.99	2.74	4.20	NA	NA	0.52	8.25	9.71	NA	NA	ZZZ
93609	26	A	Map tachycardia, add-on	4.99	2.74	2.16	2.74	2.16	0.35	8.08	7.50	8.08	7.50	ZZZ
93609	TC	A	Map tachycardia, add-on	0.00	0.00	2.05	NA	NA	0.17	0.17	2.22	NA	NA	ZZZ
93610		A	Intra-atrial pacing	3.02	1.54	2.27	NA	NA	0.34	4.90	5.63	NA	NA	000
93610	26	A	Intra-atrial pacing	3.02	1.54	1.26	1.54	1.26	0.24	4.80	4.52	4.80	4.52	000
93610	TC	A	Intra-atrial pacing	0.00	0.00	1.01	NA	NA	0.10	0.10	1.11	NA	NA	000
93612		A	Intraventricular pacing	3.02	1.49	2.45	NA	NA	0.36	4.87	5.83	NA	NA	000
93612	26	A	Intraventricular pacing	3.02	1.49	1.24	1.49	1.24	0.25	4.76	4.51	4.76	4.51	000
93612	TC	A	Intraventricular pacing	0.00	0.00	1.21	NA	NA	0.11	0.11	1.32	NA	NA	000
93613		A	Electrophys map 3d, add-on	6.99	NA	NA	3.85	3.04	0.49	NA	NA	11.33	10.52	ZZZ
93615		A	Esophageal recording	0.99	0.50	0.57	NA	NA	0.05	1.54	1.61	NA	NA	000
93615	26	A	Esophageal recording	0.99	0.50	0.33	0.50	0.33	0.03	1.52	1.35	1.52	1.35	000
93615	TC	A	Esophageal recording	0.00	0.00	0.24	NA	NA	0.02	0.02	0.26	NA	NA	000
93616	26	A	Esophageal recording	1.49	0.37	0.42	0.37	0.42	0.09	1.95	2.00	1.95	2.00	000
93618		A	Heart rhythm pacing	4.25	2.37	4.82	NA	NA	0.54	7.16	9.61	NA	NA	000
93618	26	A	Heart rhythm pacing	4.25	2.37	1.85	2.37	1.85	0.30	6.92	6.40	6.92	6.40	000
93618	TC	A	Heart rhythm pacing	0.00	0.00	2.98	NA	NA	0.24	0.24	3.22	NA	NA	000
93619		A	Electrophysiology evaluation	7.31	4.37	9.28	NA	NA	0.98	12.66	17.57	NA	NA	000
93619	26	A	Electrophysiology evaluation	7.31	3.95	3.38	3.95	3.38	0.51	11.77	11.20	11.77	11.20	000
93619	TC	A	Electrophysiology evaluation	0.00	0.42	5.90	NA	NA	0.47	0.89	6.37	NA	NA	000
93620	26	A	Electrophysiology evaluation	11.57	6.37	5.23	6.37	5.23	0.80	18.74	17.60	18.74	17.60	000
93621	26	A	Electrophysiology evaluation	2.10	1.16	0.91	1.16	0.91	0.15	3.41	3.16	3.41	3.16	ZZZ
93622	26	A	Electrophysiology evaluation	3.10	1.69	1.33	1.69	1.33	0.22	5.01	4.65	5.01	4.65	ZZZ
93623	26	A	Stimulation, pacing heart	2.85	1.57	1.23	1.57	1.23	0.20	4.62	4.28	4.62	4.28	ZZZ
93624		A	Electrophysiologic study	4.80	3.12	3.92	NA	NA	0.46	8.38	9.18	NA	NA	000
93624	26	A	Electrophysiologic study	4.80	2.69	2.32	2.69	2.32	0.33	7.82	7.45	7.82	7.45	000
93624	TC	A	Electrophysiologic study	0.00	0.43	1.60	NA	NA	0.13	0.56	1.73	NA	NA	000
93631	26	A	Heart pacing, mapping	7.59	2.81	2.79	2.81	2.79	0.97	11.37	11.35	11.37	11.35	000
93640		A	Evaluation heart device	3.51	1.93	6.90	NA	NA	0.66	6.10	11.07	NA	NA	000
93640	26	A	Evaluation heart device	3.51	1.93	1.50	1.93	1.50	0.24	5.68	5.25	5.68	5.25	000
93640	TC	A	Evaluation heart device	0.00	0.00	5.39	NA	NA	0.42	0.42	5.81	NA	NA	000
93641		A	Electrophysiology evaluation	5.92	3.26	7.95	NA	NA	0.83	10.01	14.70	NA	NA	000
93641	26	A	Electrophysiology evaluation	5.92	3.26	2.56	3.26	2.56	0.41	9.59	8.89	9.59	8.89	000
93641	TC	A	Electrophysiology evaluation	0.00	0.00	5.39	NA	NA	0.42	0.42	5.81	NA	NA	000
93642		A	Electrophysiology evaluation	4.88	7.59	8.96	NA	NA	0.57	13.04	14.41	NA	NA	000

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
93642	26	A	Electrophysiology evaluation	4.88	2.69	2.34	2.69	2.34	0.15	7.72	7.37	7.72	7.37	000
93642	TC	A	Electrophysiology evaluation	0.00	4.89	6.62	NA	NA	0.42	5.31	7.04	NA	NA	000
93650		A	Ablate heart dysrhythm focus	10.49	NA	NA	6.10	4.86	0.73	NA	NA	17.32	16.08	000
93651		A	Ablate heart dysrhythm focus	16.23	NA	NA	8.93	6.99	1.13	NA	NA	26.29	24.35	000
93652		A	Ablate heart dysrhythm focus	17.65	NA	NA	9.73	7.61	1.23	NA	NA	28.61	26.49	000
93660		A	Tilt table evaluation	1.89	3.11	2.59	NA	NA	0.08	5.08	4.56	NA	NA	000
93660	26	A	Tilt table evaluation	1.89	1.01	0.81	1.01	0.81	0.06	2.96	2.76	2.96	2.76	000
93660	TC	A	Tilt table evaluation	0.00	2.10	1.79	NA	NA	0.02	2.12	1.81	NA	NA	000
93662	26	A	Intracardiac ecg (ice)	2.80	1.54	1.22	1.54	1.22	0.09	4.43	4.11	4.43	4.11	ZZZ
93701		A	Bioimpedance, thoracic	0.17	0.71	0.91	NA	NA	0.02	0.90	1.10	NA	NA	XXX
93701	26	A	Bioimpedance, thoracic	0.17	0.06	0.07	0.06	0.07	0.01	0.24	0.25	0.24	0.25	XXX
93701	TC	A	Bioimpedance, thoracic	0.00	0.65	0.85	NA	NA	0.01	0.66	0.86	NA	NA	XXX
93720		A	Total body plethysmography	0.17	1.29	0.89	NA	NA	0.07	1.53	1.13	NA	NA	XXX
93721		A	Plethysmography tracing	0.00	1.14	0.82	NA	NA	0.06	1.20	0.88	NA	NA	XXX
93722		A	Plethysmography report	0.17	0.04	0.05	0.04	0.05	0.01	0.22	0.23	0.22	0.23	XXX
93724		A	Analyze pacemaker system	4.88	3.56	5.31	NA	NA	0.39	8.83	10.58	NA	NA	000
93724	26	A	Analyze pacemaker system	4.88	2.63	2.10	2.63	2.10	0.15	7.66	7.13	7.66	7.13	000
93724	TC	A	Analyze pacemaker system	0.00	0.93	3.21	NA	NA	0.24	1.17	3.45	NA	NA	000
93727		A	Analyze ilr system	0.52	0.66	0.32	0.66	0.32	0.02	1.20	0.86	1.20	0.86	XXX
93731		A	Analyze pacemaker system	0.45	0.81	0.70	NA	NA	0.05	1.31	1.20	NA	NA	XXX
93731	26	A	Analyze pacemaker system	0.45	0.25	0.19	0.25	0.19	0.01	0.71	0.65	0.71	0.65	XXX
93731	TC	A	Analyze pacemaker system	0.00	0.56	0.51	NA	NA	0.04	0.60	0.55	NA	NA	XXX
93732		A	Analyze pacemaker system	0.92	1.19	0.94	NA	NA	0.07	2.18	1.93	NA	NA	XXX
93732	26	A	Analyze pacemaker system	0.92	0.50	0.39	0.50	0.39	0.03	1.45	1.34	1.45	1.34	XXX
93732	TC	A	Analyze pacemaker system	0.00	0.69	0.56	NA	NA	0.04	0.73	0.60	NA	NA	XXX
93733		A	Telephone analy, pacemaker	0.17	0.32	0.68	NA	NA	0.07	0.56	0.92	NA	NA	XXX
93733	26	A	Telephone analy, pacemaker	0.17	0.09	0.08	0.09	0.08	0.01	0.27	0.26	0.27	0.26	XXX
93733	TC	A	Telephone analy, pacemaker	0.00	0.23	0.61	NA	NA	0.06	0.29	0.67	NA	NA	XXX
93734		A	Analyze pacemaker system	0.38	0.72	0.56	NA	NA	0.03	1.13	0.97	NA	NA	XXX
93734	26	A	Analyze pacemaker system	0.38	0.21	0.17	0.21	0.17	0.01	0.60	0.56	0.60	0.56	XXX
93734	TC	A	Analyze pacemaker system	0.00	0.51	0.39	NA	NA	0.02	0.53	0.41	NA	NA	XXX
93735		A	Analyze pacemaker system	0.74	0.99	0.79	NA	NA	0.06	1.79	1.59	NA	NA	XXX
93735	26	A	Analyze pacemaker system	0.74	0.40	0.31	0.40	0.31	0.02	1.16	1.07	1.16	1.07	XXX
93735	TC	A	Analyze pacemaker system	0.00	0.59	0.48	NA	NA	0.04	0.63	0.52	NA	NA	XXX
93736		A	Telephonic analy, pacemaker	0.15	0.28	0.59	NA	NA	0.07	0.50	0.81	NA	NA	XXX
93736	26	A	Telephonic analy, pacemaker	0.15	0.08	0.07	0.08	0.07	0.01	0.24	0.23	0.24	0.23	XXX
93736	TC	A	Telephonic analy, pacemaker	0.00	0.21	0.53	NA	NA	0.06	0.27	0.59	NA	NA	XXX
93740		B	Temperature gradient studies	0.16	0.04	0.15	NA	NA	0.02	0.22	0.33	NA	NA	XXX
93740	26	B	Temperature gradient studies	0.16	0.04	0.04	0.04	0.04	0.01	0.21	0.21	0.21	0.21	XXX
93740	TC	B	Temperature gradient studies	0.00	0.00	0.11	NA	NA	0.01	0.01	0.12	NA	NA	XXX
93741		A	Analyze ht pace device sngl	0.80	1.06	1.00	NA	NA	0.07	1.93	1.87	NA	NA	XXX
93741	26	A	Analyze ht pace device sngl	0.80	0.44	0.34	0.44	0.34	0.03	1.27	1.17	1.27	1.17	XXX
93741	TC	A	Analyze ht pace device sngl	0.00	0.61	0.66	NA	NA	0.04	0.65	0.70	NA	NA	XXX
93742		A	Analyze ht pace device sngl	0.91	1.20	1.07	NA	NA	0.07	2.18	2.05	NA	NA	XXX
93742	26	A	Analyze ht pace device sngl	0.91	0.51	0.40	0.51	0.40	0.03	1.45	1.34	1.45	1.34	XXX
93742	TC	A	Analyze ht pace device sngl	0.00	0.69	0.68	NA	NA	0.04	0.73	0.72	NA	NA	XXX
93743		A	Analyze ht pace device dual	1.03	1.24	1.16	NA	NA	0.07	2.34	2.26	NA	NA	XXX
93743	26	A	Analyze ht pace device dual	1.03	0.57	0.44	0.57	0.44	0.03	1.63	1.50	1.63	1.50	XXX
93743	TC	A	Analyze ht pace device dual	0.00	0.66	0.71	NA	NA	0.04	0.70	0.75	NA	NA	XXX
93744		A	Analyze ht pace device dual	1.18	1.39	1.20	NA	NA	0.08	2.65	2.46	NA	NA	XXX
93744	26	A	Analyze ht pace device dual	1.18	0.65	0.51	0.65	0.51	0.04	1.87	1.73	1.87	1.73	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
93744	TC	A	Analyze ht pace device dual	0.00	0.74	0.69	NA	NA	0.04	0.78	0.73	NA	NA	XXX
93770		B	Measure venous pressure	0.16	0.04	0.07	NA	NA	0.02	0.22	0.25	NA	NA	XXX
93770	26	B	Measure venous pressure	0.16	0.04	0.05	0.04	0.05	0.01	0.21	0.22	0.21	0.22	XXX
93770	TC	B	Measure venous pressure	0.00	0.00	0.02	NA	NA	0.01	0.01	0.03	NA	NA	XXX
93784		A	Ambulatory BP monitoring	0.38	1.37	1.51	NA	NA	0.03	1.78	1.92	NA	NA	XXX
93786		A	Ambulatory BP recording	0.00	1.10	0.96	NA	NA	0.01	1.11	0.97	NA	NA	XXX
93788		A	Ambulatory BP analysis	0.00	0.73	0.57	NA	NA	0.01	0.74	0.58	NA	NA	XXX
93790		A	Review/report BP recording	0.38	0.14	0.13	0.14	0.13	0.01	0.53	0.52	0.53	0.52	XXX
93797		A	Cardiac rehab	0.18	0.33	0.31	0.09	0.08	0.01	0.52	0.50	0.28	0.27	000
93798		A	Cardiac rehab/monitor	0.28	0.45	0.46	0.13	0.12	0.01	0.74	0.75	0.42	0.41	000
93875		A	Extracranial study	0.22	2.64	2.42	NA	NA	0.12	2.98	2.76	NA	NA	XXX
93875	26	A	Extracranial study	0.22	0.08	0.08	0.08	0.08	0.01	0.31	0.31	0.31	0.31	XXX
93875	TC	A	Extracranial study	0.00	2.57	2.34	NA	NA	0.11	2.68	2.45	NA	NA	XXX
93880		A	Extracranial study	0.60	6.36	5.77	NA	NA	0.39	7.35	6.76	NA	NA	XXX
93880	26	A	Extracranial study	0.60	0.21	0.20	0.21	0.20	0.04	0.85	0.84	0.85	0.84	XXX
93880	TC	A	Extracranial study	0.00	6.15	5.57	NA	NA	0.35	6.50	5.92	NA	NA	XXX
93882		A	Extracranial study	0.40	4.23	3.69	NA	NA	0.26	4.89	4.35	NA	NA	XXX
93882	26	A	Extracranial study	0.40	0.12	0.14	0.12	0.14	0.04	0.56	0.58	0.56	0.58	XXX
93882	TC	A	Extracranial study	0.00	4.11	3.56	NA	NA	0.22	4.33	3.78	NA	NA	XXX
93886		A	Intracranial study	0.94	7.21	6.87	NA	NA	0.45	8.60	8.26	NA	NA	XXX
93886	26	A	Intracranial study	0.94	0.30	0.35	0.30	0.35	0.06	1.30	1.35	1.30	1.35	XXX
93886	TC	A	Intracranial study	0.00	6.91	6.52	NA	NA	0.39	7.30	6.91	NA	NA	XXX
93888		A	Intracranial study	0.62	4.94	4.42	NA	NA	0.32	5.88	5.36	NA	NA	XXX
93888	26	A	Intracranial study	0.62	0.20	0.22	0.20	0.22	0.05	0.87	0.89	0.87	0.89	XXX
93888	TC	A	Intracranial study	0.00	4.74	4.20	NA	NA	0.27	5.01	4.47	NA	NA	XXX
93890		A	Tcd, vasoreactivity study	1.00	6.40	5.28	NA	NA	0.45	7.85	6.73	NA	NA	XXX
93890	26	A	Tcd, vasoreactivity study	1.00	0.32	0.38	0.32	0.38	0.06	1.38	1.44	1.38	1.44	XXX
93890	TC	A	Tcd, vasoreactivity study	0.00	6.08	4.90	NA	NA	0.39	6.47	5.29	NA	NA	XXX
93892		A	Tcd, emboli detect w/o inj	1.15	6.93	5.61	NA	NA	0.45	8.53	7.21	NA	NA	XXX
93892	26	A	Tcd, emboli detect w/o inj	1.15	0.37	0.44	0.37	0.44	0.06	1.58	1.65	1.58	1.65	XXX
93892	TC	A	Tcd, emboli detect w/o inj	0.00	6.57	5.18	NA	NA	0.39	6.96	5.57	NA	NA	XXX
93893		A	Tcd, emboli detect w/inj	1.15	6.61	5.43	NA	NA	0.45	8.21	7.03	NA	NA	XXX
93893	26	A	Tcd, emboli detect w/inj	1.15	0.37	0.44	0.37	0.44	0.06	1.58	1.65	1.58	1.65	XXX
93893	TC	A	Tcd, emboli detect w/inj	0.00	6.24	5.00	NA	NA	0.39	6.63	5.39	NA	NA	XXX
93922		A	Extremity study	0.25	3.20	2.82	NA	NA	0.15	3.60	3.22	NA	NA	XXX
93922	26	A	Extremity study	0.25	0.08	0.08	0.08	0.08	0.02	0.35	0.35	0.35	0.35	XXX
93922	TC	A	Extremity study	0.00	3.12	2.74	NA	NA	0.13	3.25	2.87	NA	NA	XXX
93923		A	Extremity study	0.45	4.86	4.25	NA	NA	0.26	5.57	4.96	NA	NA	XXX
93923	26	A	Extremity study	0.45	0.15	0.15	0.15	0.15	0.04	0.64	0.64	0.64	0.64	XXX
93923	TC	A	Extremity study	0.00	4.71	4.10	NA	NA	0.22	4.93	4.32	NA	NA	XXX
93924		A	Extremity study	0.50	6.12	5.13	NA	NA	0.30	6.92	5.93	NA	NA	XXX
93924	26	A	Extremity study	0.50	0.17	0.17	0.17	0.17	0.05	0.72	0.72	0.72	0.72	XXX
93924	TC	A	Extremity study	0.00	5.95	4.96	NA	NA	0.25	6.20	5.21	NA	NA	XXX
93925		A	Lower extremity study	0.58	8.31	7.18	NA	NA	0.39	9.28	8.15	NA	NA	XXX
93925	26	A	Lower extremity study	0.58	0.20	0.20	0.20	0.20	0.04	0.82	0.82	0.82	0.82	XXX
93925	TC	A	Lower extremity study	0.00	8.11	6.98	NA	NA	0.35	8.46	7.33	NA	NA	XXX
93926		A	Lower extremity study	0.39	5.37	4.39	NA	NA	0.27	6.03	5.05	NA	NA	XXX
93926	26	A	Lower extremity study	0.39	0.12	0.13	0.12	0.13	0.04	0.55	0.56	0.55	0.56	XXX
93926	TC	A	Lower extremity study	0.00	5.25	4.26	NA	NA	0.23	5.48	4.49	NA	NA	XXX
93930		A	Upper extremity study	0.46	6.45	5.64	NA	NA	0.41	7.32	6.51	NA	NA	XXX
93930	26	A	Upper extremity study	0.46	0.15	0.16	0.15	0.16	0.04	0.65	0.66	0.65	0.66	XXX
93930	TC	A	Upper extremity study	0.00	6.30	5.48	NA	NA	0.37	6.67	5.85	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
93931		A	Upper extremity study	0.31	4.40	3.72	NA	NA	0.27	4.98	4.30	NA	NA	XXX
93931	26	A	Upper extremity study	0.31	0.10	0.10	0.10	0.10	0.03	0.44	0.44	0.44	0.44	XXX
93931	TC	A	Upper extremity study	0.00	4.30	3.62	NA	NA	0.24	4.54	3.86	NA	NA	XXX
93965		A	Extremity study	0.35	3.14	2.89	NA	NA	0.14	3.63	3.38	NA	NA	XXX
93965	26	A	Extremity study	0.35	0.11	0.12	0.11	0.12	0.02	0.48	0.49	0.48	0.49	XXX
93965	TC	A	Extremity study	0.00	3.02	2.77	NA	NA	0.12	3.14	2.89	NA	NA	XXX
93970		A	Extremity study	0.68	6.47	5.56	NA	NA	0.46	7.61	6.70	NA	NA	XXX
93970	26	A	Extremity study	0.68	0.22	0.23	0.22	0.23	0.06	0.96	0.97	0.96	0.97	XXX
93970	TC	A	Extremity study	0.00	6.25	5.34	NA	NA	0.40	6.65	5.74	NA	NA	XXX
93971		A	Extremity study	0.45	4.25	3.76	NA	NA	0.30	5.00	4.51	NA	NA	XXX
93971	26	A	Extremity study	0.45	0.15	0.15	0.15	0.15	0.03	0.63	0.63	0.63	0.63	XXX
93971	TC	A	Extremity study	0.00	4.10	3.61	NA	NA	0.27	4.37	3.88	NA	NA	XXX
93975		A	Vascular study	1.80	8.79	7.94	NA	NA	0.56	11.15	10.30	NA	NA	XXX
93975	26	A	Vascular study	1.80	0.65	0.61	0.65	0.61	0.13	2.58	2.54	2.58	2.54	XXX
93975	TC	A	Vascular study	0.00	8.14	7.32	NA	NA	0.43	8.57	7.75	NA	NA	XXX
93976		A	Vascular study	1.21	4.77	4.45	NA	NA	0.35	6.33	6.01	NA	NA	XXX
93976	26	A	Vascular study	1.21	0.42	0.41	0.42	0.41	0.05	1.68	1.67	1.68	1.67	XXX
93976	TC	A	Vascular study	0.00	4.34	4.04	NA	NA	0.30	4.64	4.34	NA	NA	XXX
93978		A	Vascular study	0.65	6.18	4.94	NA	NA	0.43	7.26	6.02	NA	NA	XXX
93978	26	A	Vascular study	0.65	0.23	0.22	0.23	0.22	0.06	0.94	0.93	0.94	0.93	XXX
93978	TC	A	Vascular study	0.00	5.96	4.72	NA	NA	0.37	6.33	5.09	NA	NA	XXX
93979		A	Vascular study	0.44	4.45	3.53	NA	NA	0.27	5.16	4.24	NA	NA	XXX
93979	26	A	Vascular study	0.44	0.17	0.16	0.17	0.16	0.03	0.64	0.63	0.64	0.63	XXX
93979	TC	A	Vascular study	0.00	4.28	3.37	NA	NA	0.24	4.52	3.61	NA	NA	XXX
93980		A	Penile vascular study	1.25	3.55	3.03	NA	NA	0.42	5.22	4.70	NA	NA	XXX
93980	26	A	Penile vascular study	1.25	0.45	0.42	0.45	0.42	0.08	1.78	1.75	1.78	1.75	XXX
93980	TC	A	Penile vascular study	0.00	3.09	2.61	NA	NA	0.34	3.43	2.95	NA	NA	XXX
93981		A	Penile vascular study	0.44	2.93	2.89	NA	NA	0.33	3.70	3.66	NA	NA	XXX
93981	26	A	Penile vascular study	0.44	0.17	0.15	0.17	0.15	0.02	0.63	0.61	0.63	0.61	XXX
93981	TC	A	Penile vascular study	0.00	2.76	2.75	NA	NA	0.31	3.07	3.06	NA	NA	XXX
93990		A	Doppler flow testing	0.25	5.44	4.36	NA	NA	0.26	5.95	4.87	NA	NA	XXX
93990	26	A	Doppler flow testing	0.25	0.07	0.09	0.07	0.09	0.03	0.35	0.37	0.35	0.37	XXX
93990	TC	A	Doppler flow testing	0.00	5.37	4.28	NA	NA	0.23	5.60	4.51	NA	NA	XXX
94010		A	Breathing capacity test	0.17	0.73	0.69	NA	NA	0.03	0.93	0.89	NA	NA	XXX
94010	26	A	Breathing capacity test	0.17	0.04	0.05	0.04	0.05	0.01	0.22	0.23	0.22	0.23	XXX
94010	TC	A	Breathing capacity test	0.00	0.69	0.64	NA	NA	0.02	0.71	0.66	NA	NA	XXX
94014		A	Patient recorded spirometry	0.52	0.90	0.80	NA	NA	0.03	1.45	1.35	NA	NA	XXX
94015		A	Patient recorded spirometry	0.00	0.74	0.63	NA	NA	0.01	0.75	0.64	NA	NA	XXX
94016		A	Review patient spirometry	0.52	0.16	0.17	0.16	0.17	0.02	0.70	0.71	0.70	0.71	XXX
94060		A	Evaluation of wheezing	0.31	1.31	1.13	NA	NA	0.07	1.69	1.51	NA	NA	XXX
94060	26	A	Evaluation of wheezing	0.31	0.07	0.09	0.07	0.09	0.01	0.39	0.41	0.39	0.41	XXX
94060	TC	A	Evaluation of wheezing	0.00	1.23	1.04	NA	NA	0.06	1.29	1.10	NA	NA	XXX
94070		A	Evaluation of wheezing	0.60	0.99	0.86	NA	NA	0.13	1.72	1.59	NA	NA	XXX
94070	26	A	Evaluation of wheezing	0.60	0.15	0.17	0.15	0.17	0.03	0.78	0.80	0.78	0.80	XXX
94070	TC	A	Evaluation of wheezing	0.00	0.84	0.69	NA	NA	0.10	0.94	0.79	NA	NA	XXX
94150		B	Vital capacity test	0.07	0.48	0.47	NA	NA	0.02	0.57	0.56	NA	NA	XXX
94150	26	B	Vital capacity test	0.07	0.02	0.03	0.02	0.03	0.01	0.10	0.11	0.10	0.11	XXX
94150	TC	B	Vital capacity test	0.00	0.46	0.45	NA	NA	0.01	0.47	0.46	NA	NA	XXX
94200		A	Lung function test (MBC/MVV)	0.11	0.50	0.46	NA	NA	0.03	0.64	0.60	NA	NA	XXX
94200	26	A	Lung function test (MBC/MVV)	0.11	0.03	0.03	0.03	0.03	0.01	0.15	0.15	0.15	0.15	XXX
94200	TC	A	Lung function test (MBC/MVV)	0.00	0.48	0.43	NA	NA	0.02	0.50	0.45	NA	NA	XXX
94240		A	Residual lung capacity	0.26	0.83	0.70	NA	NA	0.06	1.15	1.02	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
94240	26	A	Residual lung capacity	0.26	0.06	0.08	0.06	0.08	0.01	0.33	0.35	0.33	0.35	XXX
94240	TC	A	Residual lung capacity	0.00	0.76	0.63	NA	NA	0.05	0.81	0.68	NA	NA	XXX
94250		A	Expired gas collection	0.11	0.56	0.62	NA	NA	0.02	0.69	0.75	NA	NA	XXX
94250	26	A	Expired gas collection	0.11	0.03	0.03	0.03	0.03	0.01	0.15	0.15	0.15	0.15	XXX
94250	TC	A	Expired gas collection	0.00	0.52	0.59	NA	NA	0.01	0.53	0.60	NA	NA	XXX
94260		A	Thoracic gas volume	0.13	0.76	0.63	NA	NA	0.05	0.94	0.81	NA	NA	XXX
94260	26	A	Thoracic gas volume	0.13	0.03	0.04	0.03	0.04	0.01	0.17	0.18	0.17	0.18	XXX
94260	TC	A	Thoracic gas volume	0.00	0.73	0.59	NA	NA	0.04	0.77	0.63	NA	NA	XXX
94350		A	Lung nitrogen washout curve	0.26	0.65	0.73	NA	NA	0.05	0.96	1.04	NA	NA	XXX
94350	26	A	Lung nitrogen washout curve	0.26	0.07	0.08	0.07	0.08	0.01	0.34	0.35	0.34	0.35	XXX
94350	TC	A	Lung nitrogen washout curve	0.00	0.58	0.66	NA	NA	0.04	0.62	0.70	NA	NA	XXX
94360		A	Measure airflow resistance	0.26	0.97	0.77	NA	NA	0.07	1.30	1.10	NA	NA	XXX
94360	26	A	Measure airflow resistance	0.26	0.06	0.08	0.06	0.08	0.01	0.33	0.35	0.33	0.35	XXX
94360	TC	A	Measure airflow resistance	0.00	0.91	0.69	NA	NA	0.06	0.97	0.75	NA	NA	XXX
94370		A	Breath airway closing volume	0.26	0.65	0.70	NA	NA	0.03	0.94	0.99	NA	NA	XXX
94370	26	A	Breath airway closing volume	0.26	0.08	0.08	0.08	0.08	0.01	0.35	0.35	0.35	0.35	XXX
94370	TC	A	Breath airway closing volume	0.00	0.57	0.62	NA	NA	0.02	0.59	0.64	NA	NA	XXX
94375		A	Respiratory flow volume loop	0.31	0.74	0.64	NA	NA	0.03	1.08	0.98	NA	NA	XXX
94375	26	A	Respiratory flow volume loop	0.31	0.08	0.09	0.08	0.09	0.01	0.40	0.41	0.40	0.41	XXX
94375	TC	A	Respiratory flow volume loop	0.00	0.66	0.55	NA	NA	0.02	0.68	0.57	NA	NA	XXX
94400		A	CO2 breathing response curve	0.40	1.02	0.89	NA	NA	0.09	1.51	1.38	NA	NA	XXX
94400	26	A	CO2 breathing response curve	0.40	0.10	0.12	0.10	0.12	0.03	0.53	0.55	0.53	0.55	XXX
94400	TC	A	CO2 breathing response curve	0.00	0.92	0.77	NA	NA	0.06	0.98	0.83	NA	NA	XXX
94450		A	Hypoxia response curve	0.40	1.02	0.89	NA	NA	0.04	1.46	1.33	NA	NA	XXX
94450	26	A	Hypoxia response curve	0.40	0.08	0.11	0.08	0.11	0.02	0.50	0.53	0.50	0.53	XXX
94450	TC	A	Hypoxia response curve	0.00	0.94	0.78	NA	NA	0.02	0.96	0.80	NA	NA	XXX
94452		A	Hast w/report	0.31	1.18	1.06	NA	NA	0.04	1.53	1.41	NA	NA	XXX
94452	26	A	Hast w/report	0.31	0.08	0.09	0.08	0.09	0.02	0.41	0.42	0.41	0.42	XXX
94452	TC	A	Hast w/report	0.00	1.10	0.97	NA	NA	0.02	1.12	0.99	NA	NA	XXX
94453		A	Hast w/oxygen titrate	0.40	1.66	1.55	NA	NA	0.04	2.10	1.99	NA	NA	XXX
94453	26	A	Hast w/oxygen titrate	0.40	0.11	0.12	0.11	0.12	0.02	0.53	0.54	0.53	0.54	XXX
94453	TC	A	Hast w/oxygen titrate	0.00	1.55	1.43	NA	NA	0.02	1.57	1.45	NA	NA	XXX
94620		A	Pulmonary stress test/simple	0.64	0.86	2.09	NA	NA	0.13	1.63	2.86	NA	NA	XXX
94620	26	A	Pulmonary stress test/simple	0.64	0.19	0.20	0.19	0.20	0.03	0.86	0.87	0.86	0.87	XXX
94620	TC	A	Pulmonary stress test/simple	0.00	0.67	1.89	NA	NA	0.10	0.77	1.99	NA	NA	XXX
94621		A	Pulm stress test/complex	1.42	3.17	2.45	NA	NA	0.16	4.75	4.03	NA	NA	XXX
94621	26	A	Pulm stress test/complex	1.42	0.44	0.44	0.44	0.44	0.06	1.92	1.92	1.92	1.92	XXX
94621	TC	A	Pulm stress test/complex	0.00	2.73	2.01	NA	NA	0.10	2.83	2.11	NA	NA	XXX
94640		A	Airway inhalation treatment	0.00	0.36	0.32	NA	NA	0.02	0.38	0.34	NA	NA	XXX
94656		A	Initial ventilator mgmt	1.22	1.11	1.15	0.23	0.30	0.06	2.39	2.43	1.51	1.58	XXX
94657		A	Continued ventilator mgmt	0.83	1.13	1.02	0.19	0.24	0.04	2.00	1.89	1.06	1.11	XXX
94660		A	Pos airway pressure, CPAP	0.76	0.81	0.69	0.19	0.22	.04	1.61	1.49	0.99	1.02	XXX
94662		A	Neg press ventilation, cnp	0.76	NA	NA	0.18	0.22	0.03	NA	NA	0.97	1.01	XXX
94664		A	Evaluate pt use of inhaler	0.00	0.40	0.33	NA	NA	0.04	0.44	0.37	NA	NA	XXX
94667		A	Chest wall manipulation	0.00	0.55	0.53	NA	NA	0.05	0.60	0.58	NA	NA	XXX
94668		A	Chest wall manipulation	0.00	0.50	0.46	NA	NA	0.02	0.52	0.48	NA	NA	XXX
94680		A	Exhaled air analysis, o2	0.26	1.10	1.68	NA	NA	0.07	1.43	2.01	NA	NA	XXX
94680	26	A	Exhaled air analysis, o2	0.26	0.07	0.08	0.07	0.08	0.01	0.34	0.35	0.34	0.35	XXX
94680	TC	A	Exhaled air analysis, o2	0.00	1.03	1.60	NA	NA	0.06	1.09	1.66	NA	NA	XXX
94681		A	Exhaled air analysis, o2/co2	0.20	1.08	2.17	NA	NA	0.13	1.41	2.50	NA	NA	XXX
94681	26	A	Exhaled air analysis, o2/co2	0.20	0.05	0.06	0.05	0.06	0.01	0.26	0.27	0.26	0.27	XXX
94681	TC	A	Exhaled air analysis, o2/co2	0.00	1.03	2.11	NA	NA	0.12	1.15	2.23	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
94690		A	Exhaled air analysis	0.07	0.88	1.72	NA	NA	0.05	1.00	1.84	NA	NA	XXX
94690	26	A	Exhaled air analysis	0.07	0.02	0.02	0.02	0.02	0.01	0.10	0.10	0.10	0.10	XXX
94690	TC	A	Exhaled air analysis	0.00	0.86	1.70	NA	NA	0.04	0.90	1.74	NA	NA	XXX
94720		A	Monoxide diffusing capacity	0.26	1.16	1.04	NA	NA	0.07	1.49	1.37	NA	NA	XXX
94720	26	A	Monoxide diffusing capacity	0.26	0.06	0.08	0.06	0.08	0.01	0.33	0.35	0.33	0.35	XXX
94720	TC	A	Monoxide diffusing capacity	0.00	1.10	0.97	NA	NA	0.06	1.16	1.03	NA	NA	XXX
94725		A	Membrane diffusion capacity	0.26	1.07	2.46	NA	NA	0.13	1.46	2.85	NA	NA	XXX
94725	26	A	Membrane diffusion capacity	0.26	0.09	0.08	0.09	0.08	0.01	0.36	0.35	0.36	0.35	XXX
94725	TC	A	Membrane diffusion capacity	0.00	0.98	2.38	NA	NA	0.12	1.10	2.50	NA	NA	XXX
94750		A	Pulmonary compliance study	0.23	1.85	1.47	NA	NA	0.05	2.13	1.75	NA	NA	XXX
94750	26	A	Pulmonary compliance study	0.23	0.07	0.07	0.07	0.07	0.01	0.31	0.31	0.31	0.31	XXX
94750	TC	A	Pulmonary compliance study	0.00	1.78	1.40	NA	NA	0.04	1.82	1.44	NA	NA	XXX
94760		T	Measure blood oxygen level	0.00	0.06	0.05	NA	NA	0.02	0.08	0.07	NA	NA	XXX
94761		T	Measure blood oxygen level	0.00	0.11	0.08	NA	NA	0.06	0.17	0.14	NA	NA	XXX
94762		A	Measure blood oxygen level	0.00	0.93	0.59	NA	NA	0.10	1.03	0.69	NA	NA	XXX
94770		A	Exhaled carbon dioxide test	0.15	0.83	0.77	NA	NA	0.08	1.06	1.00	NA	NA	XXX
94770	26	A	Exhaled carbon dioxide test	0.15	0.04	0.04	0.04	0.04	0.01	0.20	0.20	0.20	0.20	XXX
94770	TC	A	Exhaled carbon dioxide test	0.00	0.79	0.73	NA	NA	0.07	0.86	0.80	NA	NA	XXX
95004		A	Percut allergy skin tests	0.00	0.16	0.12	NA	NA	0.01	0.17	0.13	NA	NA	XXX
95010		A	Percut allergy titrate test	0.15	0.29	0.31	0.04	0.06	0.01	0.45	0.47	0.20	0.22	XXX
95015		A	Id allergy titrate-drug/bug	0.15	0.20	0.16	0.04	0.06	0.01	0.36	0.32	0.20	0.22	XXX
95024		A	Id allergy test, drug/bug	0.00	0.21	0.17	NA	NA	0.01	0.22	0.18	NA	NA	XXX
95027		A	Id allergy titrate-airborne	0.00	0.24	0.17	NA	NA	0.01	0.25	0.18	NA	NA	XXX
95028		A	Id allergy test-delayed type	0.00	0.29	0.25	NA	NA	0.01	0.30	0.26	NA	NA	XXX
95044		A	Allergy patch tests	0.00	0.15	0.19	NA	NA	0.01	0.16	0.20	NA	NA	XXX
95052		A	Photo patch test	0.00	0.15	0.23	NA	NA	0.01	0.16	0.24	NA	NA	XXX
95056		A	Photosensitivity tests	0.00	1.19	0.43	NA	NA	0.01	1.20	0.44	NA	NA	XXX
95060		A	Eye allergy tests	0.00	0.74	0.45	NA	NA	0.02	0.76	0.47	NA	NA	XXX
95065		A	Nose allergy test	0.00	0.68	0.32	NA	NA	0.01	0.69	0.33	NA	NA	XXX
95070		A	Bronchial allergy tests	0.00	0.79	1.92	NA	NA	0.02	0.81	1.94	NA	NA	XXX
95071		A	Bronchial allergy tests	0.00	0.88	2.42	NA	NA	0.02	0.90	2.44	NA	NA	XXX
95075		A	Ingestion challenge test	0.95	0.66	0.78	0.25	0.35	0.03	1.64	1.76	1.23	1.33	XXX
95078		A	Provocative testing	0.00	0.34	0.27	NA	NA	0.02	0.36	0.29	NA	NA	XXX
95115		A	Immunotherapy, one injection	0.00	0.22	0.35	NA	NA	0.02	0.24	0.37	NA	NA	XXX
95117		A	Immunotherapy injections	0.00	0.27	0.44	NA	NA	0.02	0.29	0.46	NA	NA	XXX
95144		A	Antigen therapy services	0.06	0.26	0.21	0.02	0.02	0.01	0.33	0.28	0.09	0.09	XXX
95145		A	Antigen therapy services	0.06	0.35	0.33	0.02	0.02	0.01	0.42	0.40	0.09	0.09	XXX
95146		A	Antigen therapy services	0.06	0.66	0.50	0.02	0.03	0.01	0.73	0.57	0.09	0.10	XXX
95147		A	Antigen therapy services	0.06	0.64	0.48	0.02	0.02	0.01	0.71	0.55	0.09	0.09	XXX
95148		A	Antigen therapy services	0.06	0.95	0.67	0.02	0.03	0.01	1.02	0.74	0.09	0.10	XXX
95149		A	Antigen therapy services	0.06	1.27	0.92	0.02	0.03	0.01	1.34	0.99	0.09	0.10	XXX
95165		A	Antigen therapy services	0.06	0.25	0.21	0.02	0.02	0.01	0.32	0.28	0.09	0.09	XXX
95170		A	Antigen therapy services	0.06	0.20	0.15	0.02	0.03	0.01	0.27	0.22	0.09	0.10	XXX
95180		A	Rapid desensitization	2.01	1.59	1.93	0.72	0.88	0.04	3.64	3.98	2.77	2.93	XXX
95250		A	Glucose monitoring, cont	0.00	3.50	3.96	NA	NA	0.01	3.51	3.97	NA	NA	XXX
95251		A	Gluc monitor, cont, phys i&r	0.52	0.16	0.18	0.16	0.18	0.02	0.70	0.72	0.70	0.72	XXX
95805		A	Multiple sleep latency test	1.88	7.14	14.77	NA	NA	0.43	9.45	17.08	NA	NA	XXX
95805	26	A	Multiple sleep latency test	1.88	0.49	0.62	0.49	0.62	0.09	2.46	2.59	2.46	2.59	XXX
95805	TC	A	Multiple sleep latency test	0.00	6.65	14.15	NA	NA	0.34	6.99	14.49	NA	NA	XXX
95806		A	Sleep study, unattended	1.66	3.97	3.50	NA	NA	0.39	6.02	5.55	NA	NA	XXX
95806	26	A	Sleep study, unattended	1.66	0.48	0.53	0.48	0.53	0.08	2.22	2.27	2.22	2.27	XXX
95806	TC	A	Sleep study, unattended	0.00	3.48	2.97	NA	NA	0.31	3.79	3.28	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
95807		A	Sleep study, attended	1.66	13.62	12.32	NA	NA	0.50	15.78	14.48	NA	NA	XXX
95807	26	A	Sleep study, attended	1.66	0.48	0.52	0.48	0.52	0.08	2.22	2.26	2.22	2.26	XXX
95807	TC	A	Sleep study, attended	0.00	13.14	11.80	NA	NA	0.42	13.56	12.22	NA	NA	XXX
95808		A	Polysomnography, 1–3	2.65	16.81	14.13	NA	NA	0.55	20.01	17.33	NA	NA	XXX
95808	26	A	Polysomnography, 1–3	2.65	0.66	0.86	0.66	0.86	0.13	3.44	3.64	3.44	3.64	XXX
95808	TC	A	Polysomnography, 1–3	0.00	16.15	13.27	NA	NA	0.42	16.57	13.69	NA	NA	XXX
95810		A	Polysomnography, 4 or more	3.52	19.68	18.08	NA	NA	0.59	23.79	22.19	NA	NA	XXX
95810	26	A	Polysomnography, 4 or more	3.52	0.94	1.12	0.94	1.12	0.17	4.63	4.81	4.63	4.81	XXX
95810	TC	A	Polysomnography, 4 or more	0.00	18.74	16.96	NA	NA	0.42	19.16	17.38	NA	NA	XXX
95811		A	Polysomnography w/cpap	3.79	21.86	19.90	NA	NA	0.61	26.26	24.30	NA	NA	XXX
95811	26	A	Polysomnography w/cpap	3.79	1.00	1.20	1.00	1.20	0.18	4.97	5.17	4.97	5.17	XXX
95811	TC	A	Polysomnography w/cpap	0.00	20.86	18.69	NA	NA	0.43	21.29	19.12	NA	NA	XXX
95812		A	Eeg, 41–60 minutes	1.08	5.82	4.49	NA	NA	0.17	7.07	5.74	NA	NA	XXX
95812	26	A	Eeg, 41–60 minutes	1.08	0.30	0.41	0.30	0.41	0.06	1.44	1.55	1.44	1.55	XXX
95812	TC	A	Eeg, 41–60 minutes	0.00	5.53	4.08	NA	NA	0.11	5.64	4.19	NA	NA	XXX
95813		A	Eeg, over 1 hour	1.73	6.55	5.41	NA	NA	0.20	8.48	7.34	NA	NA	XXX
95813	26	A	Eeg, over 1 hour	1.73	0.48	0.65	0.48	0.65	0.09	2.30	2.47	2.30	2.47	XXX
95813	TC	A	Eeg, over 1 hour	0.00	6.07	4.77	NA	NA	0.11	6.18	4.88	NA	NA	XXX
95816		A	Eeg, awake and drowsy	1.08	5.22	4.10	NA	NA	0.16	6.46	5.34	NA	NA	XXX
95816	26	A	Eeg, awake and drowsy	1.08	0.29	0.42	0.29	0.42	0.06	1.43	1.56	1.43	1.56	XXX
95816	TC	A	Eeg, awake and drowsy	0.00	4.93	3.68	NA	NA	0.10	5.03	3.78	NA	NA	XXX
95819		A	Eeg, awake and asleep	1.08	6.07	3.76	NA	NA	0.16	7.31	5.00	NA	NA	XXX
95819	26	A	Eeg, awake and asleep	1.08	0.29	0.42	0.29	0.42	0.06	1.43	1.56	1.43	1.56	XXX
95819	TC	A	Eeg, awake and asleep	0.00	5.77	3.34	NA	NA	0.10	87	3.44	NA	NA	XXX
95822		A	Eeg, coma or sleep only	1.08	5.45	4.82	NA	NA	0.19	6.72	6.09	NA	NA	XXX
95822	26	A	Eeg, coma or sleep only	1.08	0.29	0.42	0.29	0.42	0.06	1.43	1.56	1.43	1.56	XXX
95822	TC	A	Eeg, coma or sleep only	0.00	5.16	4.40	NA	NA	0.13	5.29	4.53	NA	NA	XXX
95824	26	A	Eeg, cerebral death only	0.74	0.20	0.28	0.20	0.28	0.04	0.98	1.06	0.98	1.06	XXX
95827		A	Eeg, all night recording	1.08	11.40	4.88	NA	NA	0.19	12.67	6.15	NA	NA	XXX
95827	26	A	Eeg, all night recording	1.08	0.28	0.38	0.28	0.38	0.05	1.41	1.51	1.41	1.51	XXX
95827	TC	A	Eeg, all night recording	0.00	11.13	4.51	NA	NA	0.14	11.27	4.65	NA	NA	XXX
95829		A	Surgery electrocorticogram	6.20	25.15	29.61	NA	NA	0.50	31.85	36.31	NA	NA	XXX
95829	26	A	Surgery electrocorticogram	6.20	1.74	2.18	1.74	2.18	0.48	8.42	8.86	8.42	8.86	XXX
95829	TC	A	Surgery electrocorticogram	0.00	23.41	27.43	NA	NA	0.02	23.43	27.45	NA	NA	XXX
95830		A	Insert electrodes for EEG	1.70	2.94	3.21	0.40	0.65	0.11	4.75	5.02	2.21	2.46	XXX
95831		A	Limb muscle testing, manual	0.28	0.38	0.44	0.09	0.12	0.01	0.67	0.73	0.38	0.41	XXX
95832		A	Hand muscle testing, manual	0.29	0.36	0.34	0.09	0.11	0.02	0.67	0.65	0.40	0.42	XXX
95833		A	Body muscle testing, manual	0.47	0.47	0.55	0.13	0.21	0.02	0.96	1.04	0.62	0.70	XXX
95834		A	Body muscle testing, manual	0.60	0.55	0.61	0.17	0.25	0.03	1.18	1.24	0.80	0.88	XXX
95851		A	Range of motion measurements	0.16	0.26	0.34	0.04	0.07	0.01	0.43	0.51	0.21	0.24	XXX
95852		A	Range of motion measurements	0.11	0.21	0.25	0.03	0.05	0.01	0.33	0.37	0.15	0.17	XXX
95857		A	Tensilon test	0.53	0.58	0.60	0.16	0.21	0.02	1.13	1.15	0.71	0.76	XXX
95860		A	Muscle test, one limb	0.96	1.14	1.35	NA	NA	0.07	2.17	2.38	NA	NA	XXX
95860	26	A	Muscle test, one limb	0.96	0.31	0.39	0.31	0.39	0.05	1.32	1.40	1.32	1.40	XXX
95860	TC	A	Muscle test, one limb	0.00	0.83	0.96	NA	NA	0.02	0.85	0.98	NA	NA	XXX
95861		A	Muscle test, 2 limbs	1.54	1.64	1.47	NA	NA	0.13	3.31	3.14	NA	NA	XXX
95861	26	A	Muscle test, 2 limbs	1.54	0.49	0.63	0.49	0.63	0.07	2.10	2.24	2.10	2.24	XXX
95861	TC	A	Muscle test, 2 limbs	0.00	1.15	0.84	NA	NA	0.06	1.21	0.90	NA	NA	XXX
95863		A	Muscle test, 3 limbs	1.87	1.90	1.78	NA	NA	0.15	3.92	3.80	NA	NA	XXX
95863	26	A	Muscle test, 3 limbs	1.87	0.56	0.74	0.56	0.74	0.09	2.52	2.70	2.52	2.70	XXX
95863	TC	A	Muscle test, 3 limbs	0.00	1.34	1.04	NA	NA	0.06	1.40	1.10	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
95864		A	Muscle test, 4 limbs	1.99	2.16	2.54	NA	NA	0.21	4.36	4.74	NA	NA	XXX
95864	26	A	Muscle test, 4 limbs	1.99	0.61	0.81	0.61	0.81	0.09	2.69	2.89	2.69	2.89	XXX
95864	TC	A	Muscle test, 4 limbs	0.00	1.55	1.73	NA	NA	0.12	1.67	1.85	NA	NA	XXX
95865		A	Muscle test, larynx	1.57	1.32	1.42	NA	NA	0.11	3.00	3.10	NA	NA	XXX
95865	26	A	Muscle test, larynx	1.57	0.45	0.69	0.45	0.69	0.08	2.10	2.34	2.10	2.34	XXX
95865	TC	A	Muscle test, larynx	0.00	0.87	0.73	NA	NA	0.03	0.90	0.76	NA	NA	XXX
95866		A	Muscle test, hemidiaphragm	1.25	1.31	0.90	NA	NA	0.10	2.66	2.25	NA	NA	XXX
95866	26	A	Muscle test, hemidiaphragm	1.25	0.39	0.52	0.39	0.52	0.07	1.71	1.84	1.71	1.84	XXX
95866	TC	A	Muscle test, hemidiaphragm	0.00	0.92	0.38	NA	NA	0.03	0.95	0.41	NA	NA	XXX
95867		A	Muscle test cran nerv unilat	0.79	1.10	0.97	NA	NA	0.07	1.96	1.83	NA	NA	XXX
95867	26	A	Muscle test cran nerv unilat	0.79	0.22	0.32	0.22	0.32	0.03	1.04	1.14	1.04	1.14	XXX
95867	TC	A	Muscle test cran nerv unilat	0.00	0.88	0.66	NA	NA	0.04	0.92	0.70	NA	NA	XXX
95868		A	Muscle test cran nerve bilat	1.18	1.40	1.26	NA	NA	0.10	2.68	2.54	NA	NA	XXX
95868	26	A	Muscle test cran nerve bilat	1.18	0.34	0.47	0.34	0.47	0.05	1.57	1.70	1.57	1.70	XXX
95868	TC	A	Muscle test cran nerve bilat	0.00	1.07	0.79	NA	NA	0.05	1.12	0.84	NA	NA	XXX
95869		A	Muscle test, thor paraspinal	0.37	1.02	0.53	NA	NA	0.04	1.43	0.94	NA	NA	XXX
95869	26	A	Muscle test, thor paraspinal	0.37	0.11	0.15	0.11	0.15	0.02	0.50	0.54	0.50	0.54	XXX
95869	TC	A	Muscle test, thor paraspinal	0.00	0.90	0.38	NA	NA	0.02	0.92	0.40	NA	NA	XXX
95870		A	Muscle test, nonparaspinal	0.37	0.98	0.52	NA	NA	0.04	1.39	0.93	NA	NA	XXX
95870	26	A	Muscle test, nonparaspinal	0.37	0.11	0.15	0.11	0.15	0.02	0.50	0.54	0.50	0.54	XXX
95870	TC	A	Muscle test, nonparaspinal	0.00	0.87	0.38	NA	NA	0.02	0.89	0.40	NA	NA	XXX
95872		A	Muscle test, one fiber	2.00	1.39	1.27	NA	NA	0.13	3.52	3.40	NA	NA	XXX
95872	26	A	Muscle test, one fiber	2.00	0.62	0.63	0.62	0.63	0.08	2.70	2.71	2.70	2.71	XXX
95872	TC	A	Muscle test, one fiber	0.00	0.77	0.64	NA	NA	0.05	0.82	0.69	NA	NA	XXX
95873		A	Guide nerv destr, elec stim	0.37	0.94	0.51	NA	NA	0.04	1.35	0.92	NA	NA	ZZZ
95873	26	A	Guide nerv destr, elec stim	0.37	0.11	0.15	0.11	0.15	0.02	0.50	0.54	0.50	0.54	ZZZ
95873	TC	A	Guide nerv destr, elec stim	0.00	0.82	0.36	NA	NA	0.02	0.84	0.38	NA	NA	ZZZ
95874		A	Guide nerv destr, needle emg	0.37	0.95	0.52	NA	NA	0.04	1.36	0.93	NA	NA	ZZZ
95874	26	A	Guide nerv destr, needle emg	0.37	0.12	0.16	0.12	0.16	0.02	0.51	0.55	0.51	0.55	ZZZ
95874	TC	A	Guide nerv destr, needle emg	0.00	0.83	0.36	NA	NA	0.02	0.85	0.38	NA	NA	ZZZ
95875		A	Limb exercise test	1.10	1.29	1.41	NA	NA	0.11	2.50	2.62	NA	NA	XXX
95875	26	A	Limb exercise test	1.10	0.31	0.43	0.31	0.43	0.05	1.46	1.58	1.46	1.58	XXX
95875	TC	A	Limb exercise test	0.00	0.99	0.98	NA	NA	0.06	1.05	1.04	NA	NA	XXX
95900		A	Motor nerve conduction test	0.42	0.93	1.18	NA	NA	0.04	1.39	1.64	NA	NA	XXX
95900	26	A	Motor nerve conduction test	0.42	0.14	0.17	0.14	0.17	0.02	0.58	0.61	0.58	0.61	XXX
95900	TC	A	Motor nerve conduction test	0.00	0.79	1.01	NA	NA	0.02	0.81	1.03	NA	NA	XXX
95903		A	Motor nerve conduction test	0.60	1.02	1.15	NA	NA	0.05	1.67	1.80	NA	NA	XXX
95903	26	A	Motor nerve conduction test	0.60	0.17	0.24	0.17	0.24	0.03	0.80	0.87	0.80	0.87	XXX
95903	TC	A	Motor nerve conduction test	0.00	0.85	0.91	NA	NA	0.02	0.87	0.93	NA	NA	XXX
95904		A	Sense nerve conduction test	0.34	0.86	1.03	NA	NA	0.04	1.24	1.41	NA	NA	XXX
95904	26	A	Sense nerve conduction test	0.34	0.10	0.14	0.10	0.14	0.02	0.46	0.50	0.46	0.50	XXX
95904	TC	A	Sense nerve conduction test	0.00	0.76	0.90	NA	NA	0.02	0.78	0.92	NA	NA	XXX
95920		A	Intraop nerve test add-on	2.11	1.76	2.12	NA	NA	0.23	4.10	4.46	NA	NA	ZZZ
95920	26	A	Intraop nerve test add-on	2.11	0.64	0.86	0.64	0.86	0.16	2.91	3.13	2.91	3.13	ZZZ
95920	TC	A	Intraop nerve test add-on	0.00	1.12	1.26	NA	NA	0.07	1.19	1.33	NA	NA	ZZZ
95921		A	Autonomic nerv function test	0.90	1.12	0.81	NA	NA	0.06	2.08	1.77	NA	NA	XXX
95921	26	A	Autonomic nerv function test	0.90	0.24	0.31	0.24	0.31	0.04	1.18	1.25	1.18	1.25	XXX
95921	TC	A	Autonomic nerv function test	0.00	0.89	0.51	NA	NA	0.02	0.91	0.53	NA	NA	XXX
95922		A	Autonomic nerv function test	0.96	1.63	0.99	NA	NA	0.07	2.66	2.02	NA	NA	XXX
95922	26	A	Autonomic nerv function test	0.96	0.27	0.37	0.27	0.37	0.05	1.28	1.38	1.28	1.38	XXX
95922	TC	A	Autonomic nerv function test	0.00	1.37	0.63	NA	NA	0.02	1.39	0.65	NA	NA	XXX
95923		A	Autonomic nerv function test	0.90	2.10	1.98	NA	NA	0.07	3.07	2.95	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
95923	26	A	Autonomic nerv function test	0.90	0.23	0.34	0.23	0.34	0.05	1.18	1.29	1.18	1.29	XXX
95923	TC	A	Autonomic nerv function test	0.00	1.87	1.64	NA	NA	0.02	1.89	1.66	NA	NA	XXX
95925		A	Somatosensory testing	0.54	3.15	1.64	NA	NA	0.10	3.79	2.28	NA	NA	XXX
95925	26	A	Somatosensory testing	0.54	0.16	0.21	0.16	0.21	0.04	0.74	0.79	0.74	0.79	XXX
95925	TC	A	Somatosensory testing	0.00	2.99	1.43	NA	NA	0.06	3.05	1.49	NA	NA	XXX
95926		A	Somatosensory testing	0.54	3.00	1.61	NA	NA	0.09	3.63	2.24	NA	NA	XXX
95926	26	A	Somatosensory testing	0.54	0.15	0.21	0.15	0.21	0.03	0.72	0.78	0.72	0.78	XXX
95926	TC	A	Somatosensory testing	0.00	2.85	1.40	NA	NA	0.06	2.91	1.46	NA	NA	XXX
95927		A	Somatosensory testing	0.54	3.04	1.63	NA	NA	0.10	3.68	2.27	NA	NA	XXX
95927	26	A	Somatosensory testing	0.54	0.15	0.23	0.15	0.23	0.04	0.73	0.81	0.73	0.81	XXX
95927	TC	A	Somatosensory testing	0.00	2.88	1.40	NA	NA	0.06	2.94	1.46	NA	NA	XXX
95928		A	C motor evoked, uppr limbs	1.50	3.93	3.26	NA	NA	0.09	5.52	4.85	NA	NA	XXX
95928	26	A	C motor evoked, uppr limbs	1.50	0.44	0.60	0.44	0.60	0.06	2.00	2.16	2.00	2.16	XXX
95928	TC	A	C motor evoked, uppr limbs	0.00	3.48	2.66	NA	NA	0.03	3.51	2.69	NA	NA	XXX
95929		A	C motor evoked, lwr limbs	1.50	4.24	3.48	NA	NA	0.09	5.83	5.07	NA	NA	XXX
95929	26	A	C motor evoked, lwr limbs	1.50	0.44	0.60	0.44	0.60	0.06	2.00	2.16	2.00	2.16	XXX
95930		A	Visual evoked potential test	0.35	2.60	2.34	NA	NA	0.03	2.98	2.72	NA	NA	XXX
95930	26	A	Visual evoked potential test	0.35	0.10	0.14	0.10	0.14	0.02	0.47	0.51	0.47	0.51	XXX
95930	TC	A	Visual evoked potential test	0.00	2.50	2.20	NA	NA	0.01	2.51	2.21	NA	NA	XXX
95933		A	Blink reflex test	0.59	1.08	1.04	NA	NA	0.10	1.77	1.73	NA	NA	XXX
95933	26	A	Blink reflex test	0.59	0.17	0.22	0.17	0.22	0.04	0.80	0.85	0.80	0.85	XXX
95933	TC	A	Blink reflex test	0.00	0.92	0.82	NA	NA	0.06	0.98	0.88	NA	NA	XXX
95934		A	H-reflex test	0.51	0.88	0.54	NA	NA	0.04	1.43	1.09	NA	NA	XXX
95934	26	A	H-reflex test	0.51	0.16	0.21	0.16	0.21	0.02	0.69	0.74	0.69	0.74	XXX
95934	TC	A	H-reflex test	0.00	0.72	0.34	NA	NA	0.02	0.74	0.36	NA	NA	XXX
95936		A	H-reflex test	0.55	0.60	0.49	NA	NA	0.05	1.20	1.09	NA	NA	XXX
95936	26	A	H-reflex test	0.55	0.17	0.22	0.17	0.22	0.03	0.75	0.80	0.75	0.80	XXX
95936	TC	A	H-reflex test	0.00	0.44	0.27	NA	NA	0.02	0.46	0.29	NA	NA	XXX
95937		A	Neuromuscular junction test	0.65	0.90	0.68	NA	NA	0.10	1.65	1.43	NA	NA	XXX
95937	26	A	Neuromuscular junction test	0.65	0.19	0.25	0.19	0.25	0.08	0.92	0.98	0.92	0.98	XXX
95937	TC	A	Neuromuscular junction test	0.00	0.71	0.43	NA	NA	0.02	0.73	0.45	NA	NA	XXX
95950		A	Ambulatory eeg monitoring	1.51	4.87	4.17	NA	NA	0.51	6.89	6.19	NA	NA	XXX
95950	26	A	Ambulatory eeg monitoring	1.51	0.40	0.58	0.40	0.58	0.08	1.99	2.17	1.99	2.17	XXX
95950	TC	A	Ambulatory eeg monitoring	0.00	4.46	3.59	NA	NA	0.43	4.89	4.02	NA	NA	XXX
95951	26	A	EEG monitoring/videorecord	5.99	1.63	2.33	1.63	2.33	0.32	7.94	8.64	7.94	8.64	XXX
95953		A	EEG monitoring/computer	3.30	7.13	7.51	NA	NA	0.60	11.03	11.41	NA	NA	XXX
95953	26	A	EEG monitoring/computer	3.30	0.90	1.19	0.90	1.19	0.17	4.37	4.66	4.37	4.66	XXX
95953	TC	A	EEG monitoring/computer	0.00	6.23	6.32	NA	NA	0.43	6.66	6.75	NA	NA	XXX
95954		A	EEG monitoring/giving drugs	2.45	4.85	4.39	NA	NA	0.19	7.49	7.03	NA	NA	XXX
95954	26	A	EEG monitoring/giving drugs	2.45	0.50	0.91	0.50	0.91	0.13	3.08	3.49	3.08	3.49	XXX
95954	TC	A	EEG monitoring/giving drugs	0.00	4.35	3.48	NA	NA	0.06	4.41	3.54	NA	NA	XXX
95955		A	EEG during surgery	1.01	3.51	2.63	NA	NA	0.22	4.74	3.86	NA	NA	XXX
95955	26	A	EEG during surgery	1.01	0.28	0.34	0.28	0.34	0.05	1.34	1.40	1.34	1.40	XXX
95955	TC	A	EEG during surgery	0.00	3.23	2.29	NA	NA	0.17	3.40	2.46	NA	NA	XXX
95956		A	Eeg monitoring, cable/radio	3.08	16.73	15.77	NA	NA	0.59	20.40	19.44	NA	NA	XXX
95956	26	A	Eeg monitoring, cable/radio	3.08	0.97	1.22	0.97	1.22	0.16	4.21	4.46	4.21	4.46	XXX
95956	TC	A	Eeg monitoring, cable/radio	0.00	15.76	14.55	NA	NA	0.43	16.19	14.98	NA	NA	XXX
95957		A	EEG digital analysis	1.98	5.80	3.36	NA	NA	0.23	8.01	5.57	NA	NA	XXX
95957	26	A	EEG digital analysis	1.98	0.54	0.77	0.54	0.77	0.11	2.63	2.86	2.63	2.86	XXX
95957	TC	A	EEG digital analysis	0.00	5.26	2.59	NA	NA	0.12	5.38	2.71	NA	NA	XXX
95958		A	EEG monitoring/function test	4.24	6.67	4.29	NA	NA	0.34	11.25	8.87	NA	NA	XXX

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CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
95958	26	A	EEG monitoring/function test	4.24	1.21	1.62	1.21	1.62	0.21	5.66	6.07	5.66	6.07	XXX
95958	TC	A	EEG monitoring/function test	0.00	5.46	2.68	NA	NA	0.13	5.59	2.81	NA	NA	XXX
95961		A	Electrode stimulation, brain	2.97	3.06	2.74	NA	NA	0.55	6.58	6.26	NA	NA	XXX
95961	26	A	Electrode stimulation, brain	2.97	0.87	1.21	0.87	1.21	0.48	4.32	4.66	4.32	4.66	XXX
95961	TC	A	Electrode stimulation, brain	0.00	2.19	1.53	NA	NA	0.07	2.26	1.60	NA	NA	XXX
95962		A	Electrode stim, brain add-on	3.21	2.16	2.57	NA	NA	0.39	5.76	6.17	NA	NA	ZZZ
95962	26	A	Electrode stim, brain add-on	3.21	0.88	1.26	0.88	1.26	0.32	4.41	4.79	4.41	4.79	ZZZ
95962	TC	A	Electrode stim, brain add-on	0.00	1.28	1.30	NA	NA	0.07	1.35	1.37	NA	NA	ZZZ
95965	26	A	Meg, spontaneous	7.99	2.23	3.13	2.23	3.13	0.46	10.68	11.58	10.68	11.58	XXX
95966	26	A	Meg, evoked, single	3.99	1.26	1.60	1.26	1.60	0.19	5.44	5.78	5.44	5.78	XXX
95967	26	A	Meg, evoked, each addll	3.49	1.10	1.16	1.10	1.16	0.16	4.75	4.81	4.75	4.81	ZZZ
95970		A	Analyze neurostim, no prog	0.45	0.88	0.86	0.12	0.14	0.03	1.36	1.34	0.60	0.62	XXX
95971		A	Analyze neurostim, simple	0.78	0.62	0.67	0.20	0.22	0.07	1.47	1.52	1.05	1.07	XXX
95972		A	Analyze neurostim, complex	1.50	1.20	1.21	0.46	0.48	0.14	2.84	2.85	2.10	2.12	XXX
95973		A	Analyze neurostim, complex	0.92	0.55	0.60	0.24	0.32	0.07	1.54	1.59	1.23	1.31	ZZZ
95974		A	Cranial neurostim, complex	3.00	1.45	1.64	0.82	1.18	0.16	4.61	4.80	3.98	4.34	XXX
95975		A	Cranial neurostim, complex	1.70	0.72	0.85	0.46	0.66	0.12	2.54	2.67	2.28	2.48	ZZZ
95978		A	Analyze neurostim brain/1h	3.50	1.81	1.91	1.02	1.23	0.18	5.49	5.59	4.70	4.91	XXX
95979		A	Analyz neurostim brain addon	1.64	0.71	0.83	0.45	0.63	0.08	2.43	2.55	2.17	2.35	ZZZ
95990		A	Spin/brain pump refil & main	0.00	1.65	1.54	NA	NA	0.06	1.71	1.60	NA	NA	XXX
95991		A	Spin/brain pump refil & main	0.77	1.66	1.51	0.18	0.17	0.06	2.49	2.34	1.01	1.00	XXX
96000		A	Motion analysis, video/3d	1.80	NA	NA	0.58	0.54	0.11	NA	NA	2.49	2.45	XXX
96001		A	Motion test w/ft press meas	2.15	NA	NA	0.51	0.62	0.10	NA	NA	2.76	2.87	XXX
96002		A	Dynamic surface emg	0.41	NA	NA	0.10	0.14	0.02	NA	NA	0.53	0.57	XXX
96003		A	Dynamic fine wire emg	0.37	NA	NA	0.14	0.13	0.02	NA	NA	0.53	0.52	XXX
96004		A	Phys review of motion tests	2.14	0.52	0.84	0.52	0.84	0.11	2.77	3.09	2.77	3.09	XXX
96101		A	Psycho testing by psych/phys	1.86	0.34	0.57	0.32	0.55	0.05	2.25	2.48	2.23	2.46	XXX
96102		A	Psycho testing by technician	0.50	1.17	0.79	0.09	0.15	0.01	1.68	1.30	0.60	0.66	XXX
96103		A	Psycho testing admin by comp	0.51	0.12	0.19	0.09	0.15	0.02	0.65	0.72	0.62	0.68	XXX
96105		A	Assessment of aphasia	0.00	2.04	1.84	NA	NA	0.18	2.22	2.02	NA	NA	XXX
96110		A	Developmental test, lim	0.00	0.18	0.18	NA	NA	0.18	0.36	0.36	NA	NA	XXX
96111		A	Developmental test, extend	2.60	0.64	0.95	NA	NA	0.18	3.42	3.73	NA	NA	XXX
96116		A	Neurobehavioral status exam	1.86	0.52	0.75	0.41	0.58	0.18	2.56	2.79	2.45	2.62	XXX
96118		A	Neuropsych tst by psych/phys	1.86	0.79	1.24	0.31	0.55	0.18	2.83	3.28	2.35	2.59	XXX
96119		A	Neuropsych testing by tech	0.55	1.49	1.14	0.09	0.17	0.18	2.22	1.87	0.82	0.90	XXX
96120		A	Neuropsych tst admin w/comp	0.51	0.77	0.75	0.09	0.15	0.02	1.30	1.28	0.62	0.68	XXX
96150		A	Assess hlth/behave, init	0.50	0.10	0.16	0.09	0.16	0.01	0.61	0.67	0.60	0.67	XXX
96151		A	Assess hlth/behave, subseq	0.48	0.09	0.16	0.08	0.15	0.01	0.58	0.65	0.57	0.64	XXX
96152		A	Intervene hlth/behave, indiv	0.46	0.09	0.15	0.08	0.14	0.01	0.56	0.62	0.55	0.61	XXX
96153		A	Intervene hlth/behave, group	0.10	0.02	0.04	0.02	0.03	0.01	0.13	0.15	0.13	0.14	XXX
96154		A	Interv hlth/behav, fam w/pt	0.45	0.09	0.15	0.08	0.14	0.01	0.55	0.61	0.54	0.60	XXX
96155		N	Interv hlth/behav fam no pt	0.44	0.10	0.16	0.10	0.15	0.02	0.56	0.62	0.56	0.61	XXX
96401		A	Chemo, anti-neopl, sq/im	0.21	1.88	1.35	NA	NA	0.01	2.10	1.57	NA	NA	XXX
96402		A	Chemo hormon antineopl sq/im	0.19	0.73	0.94	NA	NA	0.01	0.93	1.14	NA	NA	XXX
96405		A	Chemo intralesional, up to 7	0.52	3.53	2.71	0.22	0.24	0.03	4.08	3.26	0.77	0.79	000
96406		A	Chemo intralesional over 7	0.80	3.27	3.08	0.27	0.29	0.03	4.10	3.91	1.10	1.12	000
96409		A	Chemo, iv push, sngl drug	0.24	2.81	2.90	NA	NA	0.06	3.11	3.20	NA	NA	XXX
96411		A	Chemo, iv push, addl drug	0.20	1.51	1.59	NA	NA	0.06	1.77	1.85	NA	NA	ZZZ
96413		A	Chemo, iv infusion, 1 hr	0.28	3.66	4.07	NA	NA	0.08	4.02	4.43	NA	NA	XXX
96415		A	Chemo, iv infusion, addl hr	0.19	0.66	0.74	NA	NA	0.07	0.92	1.00	NA	NA	ZZZ
96416		A	Chemo prolong infuse w/pump	0.21	4.12	4.49	NA	NA	0.08	4.41	4.78	NA	NA	XXX
96417		A	Chemo iv infus each addl seq	0.21	1.74	1.90	NA	NA	0.07	2.02	2.18	NA	NA	ZZZ

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
96420		A	Chemo, ia, push tecnique	0.17	2.74	2.69	NA	NA	0.08	2.99	2.94	NA	NA	XXX
96422		A	Chemo ia infusion up to 1 hr	0.17	3.63	4.54	NA	NA	0.08	3.88	4.79	NA	NA	XXX
96423		A	Chemo ia infuse each addl hr	0.17	1.88	1.89	NA	NA	0.02	2.07	2.08	NA	NA	ZZZ
96425		A	Chemotherapy,infusion method	0.17	4.56	4.50	NA	NA	0.08	4.81	4.75	NA	NA	XXX
96440		A	Chemotherapy, intracavitary	2.37	5.55	7.50	0.98	1.17	0.17	8.09	10.04	3.52	3.71	000
96445		A	Chemotherapy, intracavitary	2.20	5.44	7.40	0.93	1.12	0.14	7.78	9.74	3.27	3.46	000
96450		A	Chemotherapy, into CNS	1.53	5.11	6.51	0.85	1.18	0.09	6.73	8.13	2.47	2.80	000
96521		A	Refill/maint, portable pump	0.21	3.17	3.62	NA	NA	0.06	3.44	3.89	NA	NA	XXX
96522		A	Refill/maint pump/resvr syst	0.21	2.76	2.68	NA	NA	0.06	3.03	2.95	NA	NA	XXX
96523		T	Irrig drug delivery device	0.04	0.65	0.68	NA	NA	0.01	0.70	0.73	NA	NA	XXX
96542		A	Chemotherapy injection	0.75	3.59	4.09	0.33	0.58	0.07	4.41	4.91	1.15	1.40	XXX
96567		A	Photodynamic tx, skin	0.00	3.70	2.40	NA	NA	0.04	3.74	2.44	NA	NA	XXX
96570		A	Photodynamic tx, 30 min	1.10	NA	NA	0.42	0.38	0.11	NA	NA	1.63	1.59	ZZZ
96571		A	Photodynamic tx, addl 15 min	0.55	NA	NA	0.20	0.19	0.03	NA	NA	0.78	0.77	ZZZ
96900		A	Ultraviolet light therapy	0.00	0.56	0.47	NA	NA	0.02	0.58	0.49	NA	NA	XXX
96902		B	Trichogram	0.41	0.11	0.16	0.09	0.14	0.01	0.53	0.58	0.51	0.56	XXX
96910		A	Photochemotherapy with UV–B	0.00	1.98	1.24	NA	NA	0.04	2.02	1.28	NA	NA	XXX
96912		A	Photochemotherapy with UV–A	0.00	2.55	1.58	NA	NA	0.05	2.60	1.63	NA	NA	XXX
96913		A	Photochemotherapy, UV–A or B	0.00	3.60	2.16	NA	NA	0.10	3.70	2.26	NA	NA	XXX
96920		A	Laser tx, skin < 250 sq cm	1.15	3.54	2.79	0.55	0.56	0.02	4.71	3.96	1.72	1.73	000
96921		A	Laser tx, skin 250–500 sq cm	1.17	3.44	2.82	0.52	0.56	0.03	4.64	4.02	1.72	1.76	000
96922		A	Laser tx, skin > 500 sq cm	2.10	4.53	3.75	1.00	0.72	0.04	6.67	5.89	3.14	2.86	000
97001		A	Pt evaluation	1.20	0.69	0.74	0.30	0.41	0.05	1.94	1.99	1.55	1.66	XXX
97002		A	Pt re-evaluation	0.60	0.43	0.44	0.14	0.21	0.02	1.05	1.06	0.76	0.83	XXX
97003		A	Ot evaluation	1.20	0.78	0.86	0.36	0.39	0.06	2.04	2.12	1.62	1.65	XXX
97004		A	Ot re-evaluation	0.60	0.55	0.64	0.18	0.19	0.02	1.17	1.26	0.80	0.81	XXX
97010		B	Hot or cold packs therapy	0.06	0.07	0.06	NA	NA	0.01	0.14	0.13	NA	NA	XXX
97012		A	Mechanical traction therapy	0.25	0.15	0.14	NA	NA	0.01	0.41	0.40	NA	NA	XXX
97014		I	Electric stimulation therapy	0.18	0.19	0.19	0.04	0.15	0.01	0.38	0.38	0.23	0.34	XXX
97016		A	Vasopneumatic device therapy	0.18	0.25	0.20	NA	NA	0.01	0.44	0.39	NA	NA	XXX
97018		A	Paraffin bath therapy	0.06	0.17	0.12	NA	NA	0.01	0.24	0.19	NA	NA	XXX
97022		A	Whirlpool therapy	0.17	0.34	0.24	NA	NA	0.01	0.52	0.42	NA	NA	XXX
97024		A	Diathermy e.g., microwave	0.06	0.08	0.07	NA	NA	0.01	0.15	0.14	NA	NA	XXX
97026		A	Infrared therapy	0.06	0.07	0.06	NA	NA	0.01	0.14	0.13	NA	NA	XXX
97028		A	Ultraviolet therapy	0.08	0.09	0.08	NA	NA	0.01	0.18	0.17	NA	NA	XXX
97032		A	Electrical stimulation	0.25	0.21	0.17	NA	NA	0.01	0.47	0.43	NA	NA	XXX
97033		A	Electric current therapy	0.26	0.46	0.32	NA	NA	0.01	0.73	0.59	NA	NA	XXX
97034		A	Contrast bath therapy	0.21	0.21	0.17	NA	NA	0.01	0.43	0.39	NA	NA	XXX
97035		A	Ultrasound therapy	0.21	0.11	0.10	NA	NA	0.01	0.33	0.32	NA	NA	XXX
97036		A	Hydrotherapy	0.28	0.46	0.36	NA	NA	0.01	0.75	0.65	NA	NA	XXX
97110		A	Therapeutic exercises	0.45	0.33	0.29	NA	NA	0.02	0.80	0.76	NA	NA	XXX
97112		A	Neuromuscular reeducation	0.45	0.36	0.32	NA	NA	0.01	0.82	0.78	NA	NA	XXX
97113		A	Aquatic therapy/exercises	0.44	0.56	0.43	NA	NA	0.01	1.01	0.88	NA	NA	XXX
97116		A	Gait training therapy	0.40	0.29	0.25	NA	NA	0.01	0.70	0.66	NA	NA	XXX
97124		A	Massage therapy	0.35	0.28	0.24	NA	NA	0.01	0.64	0.60	NA	NA	XXX
97140		A	Manual therapy	0.43	0.30	0.26	NA	NA	0.01	0.74	0.70	NA	NA	XXX
97150		A	Group therapeutic procedures	0.27	0.23	0.19	NA	NA	0.01	0.51	0.47	NA	NA	XXX
97530		A	Therapeutic activities	0.44	0.40	0.34	NA	NA	0.01	0.85	0.79	NA	NA	XXX
97532		A	Cognitive skills development	0.44	0.23	0.21	NA	NA	0.01	0.68	0.66	NA	NA	XXX
97533		A	Sensory integration	0.44	0.28	0.25	NA	NA	0.01	0.73	0.70	NA	NA	XXX
97535		A	Self care mngment training	0.45	0.39	0.35	NA	NA	0.01	0.85	0.81	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
97537		A	Community/work reintegration	0.45	0.29	0.27	NA	NA	0.01	0.75	0.73	NA	NA	XXX
97542		A	Wheelchair mngment training	0.45	0.30	0.29	NA	NA	0.01	0.76	0.75	NA	NA	XXX
97597		A	Active wound care/20 cm or <	0.58	1.14	0.78	NA	NA	0.05	1.77	1.41	NA	NA	XXX
97598		A	Active wound care > 20 cm	0.80	1.33	0.93	NA	NA	0.05	2.18	1.78	NA	NA	XXX
97605		A	Neg press wound tx, < 50 cm	0.55	0.43	0.36	0.13	0.20	0.02	1.00	0.93	0.70	0.77	XXX
97606		A	Neg press wound tx, > 50 cm	0.60	0.44	0.37	0.14	0.22	0.03	1.07	1.00	0.77	0.85	XXX
97750		A	Physical performance test	0.45	0.35	0.33	NA	NA	0.02	0.82	0.80	NA	NA	XXX
97755		A	Assistive technology assess	0.62	0.29	0.28	NA	NA	0.02	0.93	0.92	NA	NA	XXX
97760		A	Orthotic mgmt and training	0.45	0.44	0.37	0.10	0.18	0.03	0.92	0.85	0.58	0.66	XXX
97761		A	Prosthetic training	0.45	0.34	0.30	0.10	0.17	0.02	0.81	0.77	0.57	0.64	XXX
97762		A	C/o for orthotic/prosth use	0.25	0.76	0.51	0.06	0.16	0.02	1.03	0.78	0.33	0.43	XXX
97802		A	Medical nutrition, indiv, in	0.00	0.35	0.44	NA	NA	0.01	0.36	0.45	NA	NA	XXX
97803		A	Med nutrition, indiv, subseq	0.00	0.31	0.43	NA	NA	0.01	0.32	0.44	NA	NA	XXX
97804		A	Medical nutrition, group	0.00	0.13	0.17	NA	NA	0.01	0.14	0.18	NA	NA	XXX
97810		N	Acupunct w/o stimul 15 min	0.60	0.25	0.35	0.13	0.21	0.03	0.88	0.98	0.76	0.84	XXX
97811		N	Acupunct w/o stimul addl 15m	0.50	0.15	0.23	0.11	0.17	0.03	0.68	0.76	0.64	0.70	ZZZ
97813		N	Acupunct w/stimul 15 min	0.65	0.27	0.37	0.15	0.23	0.03	0.95	1.05	0.83	0.91	XXX
97814		N	Acupunct w/stimul addl 15m	0.55	0.19	0.27	0.12	0.19	0.03	0.77	0.85	0.70	0.77	ZZZ
98925		A	Osteopathic manipulation	0.45	0.28	0.31	0.11	0.13	0.02	0.75	0.78	0.58	0.60	000
98926		A	Osteopathic manipulation	0.65	0.36	0.40	0.16	0.23	0.03	1.04	1.08	0.84	0.91	000
98927		A	Osteopathic manipulation	0.87	0.44	0.49	0.21	0.27	0.03	1.34	1.39	1.11	1.17	000
98928		A	Osteopathic manipulation	1.03	0.50	0.57	0.25	0.32	0.04	1.57	1.64	1.32	1.39	000
98929		A	Osteopathic manipulation	1.19	0.56	0.64	0.28	0.35	0.05	1.80	1.88	1.52	1.59	000
98940		A	Chiropractic manipulation	0.45	0.20	0.22	0.12	0.12	0.01	0.66	0.68	0.58	0.58	000
98941		A	Chiropractic manipulation	0.65	0.26	0.29	0.17	0.17	0.01	0.92	0.95	0.83	0.83	000
98942		A	Chiropractic manipulation	0.87	0.32	0.35	0.22	0.23	0.02	1.21	1.24	1.11	1.12	000
98943		N	Chiropractic manipulation	0.40	0.17	0.22	0.09	0.14	0.01	0.58	0.63	0.50	0.55	XXX
99170		A	Anogenital exam, child	1.75	1.50	1.70	0.49	0.54	0.08	3.33	3.53	2.32	2.37	000
99175		A	Induction of vomiting	0.00	0.33	1.13	NA	NA	0.10	0.43	1.23	NA	NA	XXX
99183		A	Hyperbaric oxygen therapy	2.34	2.59	3.09	0.56	0.68	0.16	5.09	5.59	3.06	3.18	XXX
99185		A	Regional hypothermia	0.00	1.67	0.90	NA	NA	0.04	1.71	0.94	NA	NA	XXX
99186		A	Total body hypothermia	0.00	1.41	1.70	NA	NA	0.45	1.86	2.15	NA	NA	XXX
99195		A	Phlebotomy	0.00	2.62	0.99	NA	NA	0.02	2.64	1.01	NA	NA	XXX
99201		A	Office/outpatient visit, new	0.45	0.54	0.50	0.15	0.15	0.03	1.02	0.98	0.63	0.63	XXX
99202		A	Office/outpatient visit, new	0.88	0.83	0.80	0.29	0.31	0.05	1.76	1.73	1.22	1.24	XXX
99203		A	Office/outpatient visit, new	1.34	1.09	1.12	0.41	0.46	0.09	2.52	2.55	1.84	1.89	XXX
99204		A	Office/outpatient visit, new	2.30	1.48	1.50	0.70	0.71	0.12	3.90	3.92	3.12	3.13	XXX
99205		A	Office/outpatient visit, new	3.00	1.77	1.78	0.89	0.94	0.15	4.92	4.93	4.04	4.09	XXX
99211		A	Office/outpatient visit, est	0.17	0.33	0.38	0.06	0.06	0.01	0.51	0.56	0.24	0.24	XXX
99212		A	Office/outpatient visit, est	0.45	0.55	0.54	0.15	0.16	0.03	1.03	1.02	0.63	0.64	XXX
99213		A	Office/outpatient visit, est	0.92	0.76	0.71	0.28	0.25	0.03	1.71	1.66	1.23	1.20	XXX
99214		A	Office/outpatient visit, est	1.42	1.10	1.05	0.43	0.42	0.05	2.57	2.52	1.90	1.89	XXX
99215		A	Office/outpatient visit, est	2.00	1.38	1.34	0.60	0.64	0.08	3.46	3.42	2.68	2.72	XXX
99217		A	Observation care discharge	1.28	NA	NA	0.50	0.52	0.06	NA	NA	1.84	1.86	XXX
99218		A	Observation care	1.28	NA	NA	0.38	0.43	0.06	NA	NA	1.72	1.77	XXX
99219		A	Observation care	2.14	NA	NA	0.59	0.69	0.10	NA	NA	2.83	2.93	XXX
99220		A	Observation care	2.99	NA	NA	0.84	0.98	0.14	NA	NA	3.97	4.11	XXX
99221		A	Initial hospital care	1.88	NA	NA	0.54	0.47	0.07	NA	NA	2.49	2.42	XXX
99222		A	Initial hospital care	2.56	NA	NA	0.70	0.73	0.10	NA	NA	3.36	3.39	XXX
99223		A	Initial hospital care	3.78	NA	NA	1.07	1.04	0.13	NA	NA	4.98	4.95	XXX
99231		A	Subsequent hospital care	0.76	NA	NA	0.24	0.23	0.03	NA	NA	1.03	1.02	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
99232		A	Subsequent hospital care	1.39	NA	NA	0.42	0.38	0.04	NA	NA	1.85	1.81	XXX
99233		A	Subsequent hospital care	2.00	NA	NA	0.59	0.54	0.06	NA	NA	2.65	2.60	XXX
99234		A	Observ/hosp same date	2.56	NA	NA	0.78	0.86	0.13	NA	NA	3.47	3.55	XXX
99235		A	Observ/hosp same date	3.41	NA	NA	0.98	1.11	0.16	NA	NA	4.55	4.68	XXX
99236		A	Observ/hosp same date	4.26	NA	NA	1.23	1.39	0.19	NA	NA	5.68	5.84	XXX
99238		A	Hospital discharge day	1.28	NA	NA	0.49	0.53	0.05	NA	NA	1.82	1.86	XXX
99239		A	Hospital discharge day	1.90	NA	NA	0.66	0.71	0.07	NA	NA	2.63	2.68	XXX
99241		A	Office consultation	0.64	0.66	0.65	0.22	0.22	0.05	1.35	1.34	0.91	0.91	XXX
99242		A	Office consultation	1.34	1.08	1.05	0.47	0.46	0.10	2.52	2.49	1.91	1.90	XXX
99243		A	Office consultation	1.88	1.45	1.41	0.66	0.64	0.13	3.46	3.42	2.67	2.65	XXX
99244		A	Office consultation	3.02	1.95	1.86	1.09	0.96	0.16	5.13	5.04	4.27	4.14	XXX
99245		A	Office consultation	3.77	2.27	2.28	1.31	1.26	0.21	6.25	6.26	5.29	5.24	XXX
99251		A	Initial inpatient consult	1.00	NA	NA	0.31	0.26	0.05	NA	NA	1.36	1.31	XXX
99252		A	Initial inpatient consult	1.50	NA	NA	0.50	0.50	0.09	NA	NA	2.09	2.09	XXX
99253		A	Initial inpatient consult	2.27	NA	NA	0.81	0.71	0.11	NA	NA	3.19	3.09	XXX
99254		A	Initial inpatient consult	3.29	NA	NA	1.20	1.04	0.13	NA	NA	4.62	4.46	XXX
99255		A	Initial inpatient consult	4.00	NA	NA	1.40	1.36	0.18	NA	NA	5.58	5.54	XXX
99281		A	Emergency dept visit	0.45	NA	NA	0.09	0.09	0.02	NA	NA	0.56	0.56	XXX
99282		A	Emergency dept visit	0.88	NA	NA	0.17	0.15	0.04	NA	NA	1.09	1.07	XXX
99283		A	Emergency dept visit	1.34	NA	NA	0.24	0.29	0.09	NA	NA	1.67	1.72	XXX
99284		A	Emergency dept visit	2.56	NA	NA	0.45	0.47	0.14	NA	NA	3.15	3.17	XXX
99285		A	Emergency dept visit	3.80	NA	NA	0.65	0.70	0.23	NA	NA	4.68	4.73	XXX
99289		A	Ped crit care transport	4.79	NA	NA	1.08	1.36	0.24	NA	NA	6.11	6.39	XXX
99290		A	Ped crit care transport addl	2.40	NA	NA	0.58	0.75	0.12	NA	NA	3.10	3.27	ZZZ
99291		A	Critical care, first hour	4.50	2.25	2.50	1.10	1.24	0.21	6.96	7.21	5.81	5.95	XXX
99292		A	Critical care, addll 30 min	2.25	0.80	0.88	0.56	0.62	0.11	3.16	3.24	2.92	2.98	ZZZ
99293		A	Ped critical care, initial	15.98	NA	NA	3.48	4.44	1.12	NA	NA	20.58	21.54	XXX
99294		A	Ped critical care, subseq	7.99	NA	NA	1.67	2.23	0.45	NA	NA	10.11	10.67	XXX
99295		A	Neonate crit care, initial	18.46	NA	NA	4.26	5.11	1.16	NA	NA	23.88	24.73	XXX
99296		A	Neonate critical care subseq	7.99	NA	NA	1.71	2.34	0.32	NA	NA	10.02	10.65	XXX
99298		A	Ic for lbw infant < 1500 gm	2.75	NA	NA	0.64	0.86	0.17	NA	NA	3.56	3.78	XXX
99299		A	Ic, lbw infant 1500–2500 gm	2.50	NA	NA	0.78	0.84	0.16	NA	NA	3.44	3.50	XXX
99300		A	Ic, infant pbw 2501–5000 gm	2.40	NA	NA	0.71	0.81	0.15	NA	NA	3.26	3.36	XXX
99304		A	Nursing facility care, init	1.20	0.44	0.48	0.44	0.48	0.05	1.69	1.73	1.69	1.73	XXX
99305		A	Nursing facility care, init	1.61	0.55	0.61	0.55	0.61	0.07	2.23	2.29	2.23	2.29	XXX
99306		A	Nursing facility care, init	2.01	0.64	0.72	0.64	0.72	0.09	2.74	2.82	2.74	2.82	XXX
99307		A	Nursing fac care, subseq	0.60	0.26	0.27	0.26	0.27	0.03	0.89	0.90	0.89	0.90	XXX
99308		A	Nursing fac care, subseq	1.00	0.42	0.44	0.42	0.44	0.04	1.46	1.48	1.46	1.48	XXX
99309		A	Nursing fac care, subseq	1.42	0.57	0.61	0.57	0.61	0.06	2.05	2.09	2.05	2.09	XXX
99310		A	Nursing fac care, subseq	1.77	0.71	0.76	0.71	0.76	0.08	2.56	2.61	2.56	2.61	XXX
99315		A	Nursing fac discharge day	1.13	0.40	0.44	0.40	0.44	0.05	1.58	1.62	1.58	1.62	XXX
99316		A	Nursing fac discharge day	1.50	0.50	0.57	0.50	0.57	0.06	2.06	2.13	2.06	2.13	XXX
99318		A	Annual nursing fac assessmnt	1.20	0.44	0.48	0.44	0.48	0.05	1.69	1.73	1.69	1.73	XXX
99324		A	Domicil/r-home visit new pat	1.01	0.42	0.47	NA	NA	0.05	1.48	1.53	NA	NA	XXX
99325		A	Domicil/r-home visit new pat	1.52	0.55	0.65	NA	NA	0.07	2.14	2.24	NA	NA	XXX
99326		A	Domicil/r-home visit new pat	2.27	0.71	0.87	NA	NA	0.10	3.08	3.24	NA	NA	XXX
99327		A	Domicil/r-home visit new pat	3.03	0.89	1.10	NA	NA	0.13	4.05	4.26	NA	NA	XXX
99328		A	Domicil/r-home visit new pat	3.78	1.07	1.33	NA	NA	0.16	5.01	5.27	NA	NA	XXX
99334		A	Domicil/r-home visit est pat	0.76	0.35	0.39	NA	NA	0.04	1.15	1.19	NA	NA	XXX
99335		A	Domicil/r-home visit est pat	1.26	0.47	0.55	NA	NA	0.06	1.79	1.87	NA	NA	XXX
99336		A	Domicil/r-home visit est pat	2.02	0.64	0.78	NA	NA	0.09	2.75	2.89	NA	NA	XXX
99337		A	Domicil/r-home visit est pat	3.03	0.88	1.08	NA	NA	0.13	4.04	4.24	NA	NA	XXX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
99341		A	Home visit, new patient	1.01	0.25	0.42	NA	NA	0.05	1.31	1.48	NA	NA	XXX
99342		A	Home visit, new patient	1.52	0.38	0.61	NA	NA	0.07	1.97	2.20	NA	NA	XXX
99343		A	Home visit, new patient	2.27	0.57	0.85	NA	NA	0.10	2.94	3.22	NA	NA	XXX
99344		A	Home visit, new patient	3.03	0.72	1.07	NA	NA	0.13	3.88	4.23	NA	NA	XXX
99345		A	Home visit, new patient	3.78	0.88	1.29	NA	NA	0.16	4.82	5.23	NA	NA	XXX
99347		A	Home visit, est patient	0.76	0.19	0.35	NA	NA	0.04	0.99	1.15	NA	NA	XXX
99348		A	Home visit, est patient	1.26	0.31	0.51	NA	NA	0.06	1.63	1.83	NA	NA	XXX
99349		A	Home visit, est patient	2.02	0.48	0.74	NA	NA	0.09	2.59	2.85	NA	NA	XXX
99350		A	Home visit, est patient	3.03	0.72	1.07	NA	NA	0.13	3.88	4.23	NA	NA	XXX
99354		A	Prolonged service, office	1.77	0.65	0.74	0.49	0.62	0.08	2.50	2.59	2.34	2.47	ZZZ
99355		A	Prolonged service, office	1.77	0.67	0.73	0.52	0.60	0.07	2.51	2.57	2.36	2.44	ZZZ
99356		A	Prolonged service, inpatient	1.71	NA	NA	0.50	0.59	0.07	NA	NA	2.28	2.37	ZZZ
99357		A	Prolonged service, inpatient	1.71	NA	NA	0.49	0.60	0.08	NA	NA	2.28	2.39	ZZZ
99374		B	Home health care supervision	1.10	0.54	0.66	0.25	0.38	0.05	1.69	1.81	1.40	1.53	XXX
99375		I	Home health care supervision	1.73	0.74	1.35	0.39	1.26	0.07	2.54	3.15	2.19	3.06	XXX
99377		B	Hospice care supervision	1.10	0.54	0.66	0.25	0.38	0.05	1.69	1.81	1.40	1.53	XXX
99378		I	Hospice care supervision	1.73	0.74	1.65	0.39	1.56	0.07	2.54	3.45	2.19	3.36	XXX
99379		B	Nursing fac care supervision	1.10	0.54	0.66	0.25	0.38	0.04	1.68	1.80	1.39	1.52	XXX
99380		B	Nursing fac care supervision	1.73	0.74	0.93	0.39	0.59	0.06	2.53	2.72	2.18	2.38	XXX
99381		N	Prev visit, new, infant	1.19	0.99	1.37	0.27	0.41	0.05	2.23	2.61	1.51	1.65	XXX
99382		N	Prev visit, new, age 1–4	1.36	1.03	1.41	0.31	0.47	0.05	2.44	2.82	1.72	1.88	XXX
99383		N	Prev visit, new, age 5–11	1.36	1.02	1.37	0.31	0.47	0.05	2.43	2.78	1.72	1.88	XXX
99384		N	Prev visit, new, age 12–17	1.53	1.06	1.43	0.34	0.53	0.06	2.65	3.02	1.93	2.12	XXX
99385		N	Prev visit, new, age 18–39	1.53	1.06	1.43	0.34	0.53	0.06	2.65	3.02	1.93	2.12	XXX
99386		N	Prev visit, new, age 40–64	1.88	1.14	1.60	0.42	0.65	0.07	3.09	3.55	2.37	2.60	XXX
99387		N	Prev visit, new, 65 & over	2.06	1.27	1.73	0.46	0.71	0.07	3.40	3.86	2.59	2.84	XXX
99391		N	Prev visit, est, infant	1.02	0.86	0.98	0.23	0.35	0.04	1.92	2.04	1.29	1.41	XXX
99392		N	Prev visit, est, age 1–4	1.19	0.89	1.04	0.27	0.41	0.05	2.13	2.28	1.51	1.65	XXX
99393		N	Prev visit, est, age 5–11	1.19	0.89	1.02	0.27	0.41	0.05	2.13	2.26	1.51	1.65	XXX
99394		N	Prev visit, est, age 12–17	1.36	0.93	1.08	0.31	0.47	0.05	2.34	2.49	1.72	1.88	XXX
99395		N	Prev visit, est, age 18–39	1.36	0.93	1.10	0.31	0.47	0.05	2.34	2.51	1.72	1.88	XXX
99396		N	Prev visit, est, age 40–64	1.53	0.97	1.18	0.34	0.53	0.06	2.56	2.77	1.93	2.12	XXX
99397		N	Prev visit, est, 65 & over	1.71	1.11	1.30	0.38	0.59	0.06	2.88	3.07	2.15	2.36	XXX
99401		N	Preventive counseling, indiv	0.48	0.36	0.56	0.11	0.17	0.01	0.85	1.05	0.60	0.66	XXX
99402		N	Preventive counseling, indiv	0.98	0.47	0.77	0.22	0.33	0.02	1.47	1.77	1.22	1.33	XXX
99403		N	Preventive counseling, indiv	1.46	0.58	0.96	0.33	0.50	0.04	2.08	2.46	1.83	2.00	XXX
99404		N	Preventive counseling, indiv	1.95	0.69	1.16	0.44	0.67	0.05	2.69	3.16	2.44	2.67	XXX
99411		N	Preventive counseling, group	0.15	0.22	0.19	0.03	0.05	0.01	0.38	0.35	0.19	0.21	XXX
99412		N	Preventive counseling, group	0.25	0.24	0.25	0.06	0.09	0.01	0.50	0.51	0.32	0.35	XXX
99431		A	Initial care, normal newborn	1.17	NA	NA	0.26	0.35	0.05	NA	NA	1.48	1.57	XXX
99432		A	Newborn care, not in hosp	1.26	1.00	0.95	0.28	0.37	0.07	2.33	2.28	1.61	1.70	XXX
99433		A	Normal newborn care/hospital	0.62	NA	NA	0.14	0.19	0.02	NA	NA	0.78	0.83	XXX
99435		A	Newborn discharge day hosp	1.50	NA	NA	0.45	0.56	0.06	NA	NA	2.01	2.12	XXX
99436		A	Attendance, birth	1.50	NA	NA	0.33	0.44	0.06	NA	NA	1.89	2.00	XXX
99440		A	Newborn resuscitation	2.93	NA	NA	0.66	0.86	0.12	NA	NA	3.71	3.91	XXX
G0101		A	CA screen;pelvic/breast exam	0.45	0.48	0.51	0.12	0.16	0.02	0.95	0.98	0.59	0.63	XXX
G0102		A	Office/outpatient visit, est	0.17	0.33	0.38	0.06	0.06	0.01	0.51	0.56	0.24	0.24	XXX
G0104		A	Diagnostic sigmoidoscopy	0.96	2.54	2.35	0.63	0.53	0.08	3.58	3.39	1.67	1.57	000
G0105		A	Diagnostic colonoscopy	3.69	6.55	6.26	1.88	1.57	0.30	10.54	10.25	5.87	5.56	000
G0105	53	A	Diagnostic sigmoidoscopy	0.96	2.54	2.35	0.63	0.53	0.08	3.58	3.39	1.67	1.57	000
G0106		A	Contrast x-ray exam of colon	0.99	5.17	3.21	NA	NA	0.17	6.33	4.37	NA	NA	XXX
G0106	26	A	Contrast x-ray exam of colon	0.99	0.34	0.33	0.34	0.33	0.04	1.37	1.36	1.37	1.36	XXX

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CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
G0106	TC	A	Contrast x-ray exam of colon	0.00	4.83	2.89	NA	NA	0.13	4.96	3.02	NA	NA	XXX
G0108		A	Diab manage trn per indiv	0.00	0.59	0.77	NA	NA	0.01	0.60	0.78	NA	NA	XXX
G0109		A	Diab manage trn ind/group	0.00	0.31	0.44	NA	NA	0.01	0.32	0.45	NA	NA	XXX
G0117		T	Glaucoma scrn hgh risk direc	0.45	0.80	0.74	0.13	0.18	0.01	1.26	1.20	0.59	0.64	XXX
G0118		T	Glaucoma scrn hgh risk direc	0.17	0.80	0.60	0.06	0.06	0.01	0.98	0.78	0.24	0.24	XXX
G0120		A	Contrast x-ray exam of colon	0.99	5.17	3.21	NA	NA	0.17	6.33	4.37	NA	NA	XXX
G0120	26	A	Contrast x-ray exam of colon	0.99	0.34	0.33	0.34	0.33	0.04	1.37	1.36	1.37	1.36	XXX
G0120	TC	A	Contrast x-ray exam of colon	0.00	4.83	2.89	NA	NA	0.13	4.96	3.02	NA	NA	XXX
G0121		A	Diagnostic colonoscopy	3.69	6.55	6.26	1.88	1.57	0.30	10.54	10.25	5.87	5.56	000
G0121	53	A	Diagnostic sigmoidoscopy	0.96	2.54	2.35	0.63	0.53	0.08	3.58	3.39	1.67	1.57	000
G0122		N	Colon ca scrn; barium enema	0.99	5.63	3.34	5.63	3.34	0.18	6.80	4.51	6.80	4.51	XXX
G0122	26	N	Colon ca scrn; barium enema	0.99	0.22	0.34	0.22	0.34	0.05	1.26	1.38	1.26	1.38	XXX
G0122	TC	N	Colon ca scrn; barium enema	0.00	5.41	3.00	5.41	3.00	0.13	5.54	3.13	5.54	3.13	XXX
G0124		A	Cytopath, c/v, interpret	0.42	0.38	0.21	0.38	0.21	0.02	0.82	0.65	0.82	0.65	XXX
G0127		R	Trim nail(s)	0.17	0.38	0.28	0.04	0.06	0.01	0.56	0.46	0.22	0.24	000
G0128		R	CORF skilled nursing service	0.08	0.02	0.03	0.02	0.03	0.01	0.11	0.12	0.11	0.12	XXX
G0130		A	Single energy x-ray study	0.22	0.56	0.79	NA	NA	0.06	0.84	1.07	NA	NA	XXX
G0130	26	A	Single energy x-ray study	0.22	0.06	0.07	0.06	0.07	0.01	0.29	0.30	0.29	0.30	XXX
G0130	TC	A	Single energy x-ray study	0.00	0.50	0.73	NA	NA	0.05	0.55	0.78	NA	NA	XXX
G0141		A	Cytopath, c/v, interpret	0.42	0.38	0.21	0.38	0.21	0.02	0.82	0.65	0.82	0.65	XXX
G0166		A	Extrnl counterpulse, per tx	0.07	4.62	3.84	0.04	0.03	0.01	4.70	3.92	0.12	0.11	XXX
G0168		A	Wound closure by adhesive	0.45	1.56	1.85	0.20	0.22	0.03	2.04	2.33	0.68	0.70	000
G0179		A	MD recertification HHA PT	0.45	0.47	0.89	NA	NA	0.02	0.94	1.36	NA	NA	XXX
G0180		A	MD certification HHA patient	0.67	0.56	1.09	NA	NA	0.03	1.26	1.79	NA	NA	XXX
G0181		A	Home health care supervision	1.73	0.80	1.31	NA	NA	0.07	2.60	3.11	NA	NA	XXX
G0182		A	Hospice care supervision	1.73	0.82	1.45	NA	NA	0.07	2.62	3.25	NA	NA	XXX
G0202		A	Screeningmammographydigital	0.70	2.82	2.79	NA	NA	0.10	3.62	3.59	NA	NA	XXX
G0202	26	A	Screeningmammographydigital	0.70	0.24	0.23	0.24	0.23	0.03	0.97	0.96	0.97	0.96	XXX
G0202	TC	A	Screeningmammographydigital	0.00	2.58	2.56	NA	NA	0.07	2.65	2.63	NA	NA	XXX
G0204		A	Diagnosticmammographydigital	0.87	3.42	2.95	NA	NA	0.11	4.40	3.93	NA	NA	XXX
G0204	26	A	Diagnosticmammographydigital	0.87	0.30	0.29	0.30	0.29	0.04	1.21	1.20	1.21	1.20	XXX
G0204	TC	A	Diagnosticmammographydigital	0.00	3.12	2.66	NA	NA	0.07	3.19	2.73	NA	NA	XXX
G0206		A	Diagnosticmammographydigital	0.70	2.68	2.37	NA	NA	0.09	3.47	3.16	NA	NA	XXX
G0206	26	A	Diagnosticmammographydigital	0.70	0.24	0.23	0.24	0.23	0.03	0.97	0.96	0.97	0.96	XXX
G0206	TC	A	Diagnosticmammographydigital	0.00	2.44	2.13	NA	NA	0.06	2.50	2.19	NA	NA	XXX
G0237		A	Therapeutic procd strg endur	0.00	0.21	0.41	NA	NA	0.02	0.23	0.43	NA	NA	XXX
G0238		A	Oth resp proc, indiv	0.00	0.23	0.43	NA	NA	0.02	0.25	0.45	NA	NA	XXX
G0239		A	Oth resp proc, group	0.00	0.31	0.33	NA	NA	0.02	0.33	0.35	NA	NA	XXX
G0245		A	Office/outpatient visit, new	0.88	0.83	0.80	0.29	0.31	0.05	1.76	1.73	1.22	1.24	XXX
G0246		A	Office/outpatient visit, est	0.45	0.55	0.54	0.15	0.16	0.03	1.03	1.02	0.63	0.64	XXX
G0247		A	Debride skin, partial	0.50	0.68	0.56	0.16	0.20	0.06	1.24	1.12	0.72	0.76	ZZZ
G0248		R	Demonstrate use home inr mon	0.00	3.21	5.78	NA	NA	0.01	3.22	5.79	NA	NA	XXX
G0249		R	Provide test material,equipm	0.00	2.31	3.56	NA	NA	0.01	2.32	3.57	NA	NA	XXX
G0250		R	MD review interpret of test	0.18	0.08	0.07	0.08	0.07	0.01	0.27	0.26	0.27	0.26	XXX
G0252	26	N	PET imaging initial dx	1.50	0.34	0.54	0.34	0.54	0.04	1.88	2.08	1.88	2.08	XXX
G0268		A	Removal of impacted wax md	0.61	0.59	0.62	0.17	0.22	0.02	1.22	1.25	0.80	0.85	000
G0270		A	Med nutrition, indiv, subseq	0.00	0.31	0.43	NA	NA	0.01	0.32	0.44	NA	NA	XXX
G0271		A	Medical nutrition, group	0.00	0.13	0.17	NA	NA	0.01	0.14	0.18	NA	NA	XXX
G0275		A	Renal angio, cardiac cath	0.25	NA	NA	0.14	0.11	0.01	NA	NA	0.40	0.37	ZZZ

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[3] Indicates RVUs are not used for Medicare payment.

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT [1] HCPCS [2]	Mod	Status	Description	Physician work RVUs [3]	Fully implemented non-facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility PE RVUs	Year 2007 transitional facility PE RVUs	Mal-practice RVUs	Fully implemented non-facility total	Year 2007 transitional non-facility total	Fully implemented facility total	Year 2007 transitional facility total	Global
G0278		A	Iliac art angio,cardiac cath	0.25	NA	NA	0.14	0.11	0.01	NA	NA	0.40	0.37	ZZZ
G0281		A	Elec stim unattend for press	0.18	0.15	0.12	NA	NA	0.01	0.34	0.31	NA	NA	XXX
G0283		A	Elec stim other than wound	0.18	0.15	0.12	NA	NA	0.01	0.34	0.31	NA	NA	XXX
G0288		A	Recon, CTA for surg plan	0.00	1.03	8.24	NA	NA	0.18	1.21	8.42	NA	NA	XXX
G0289		A	Arthro, loose body + chondro	1.48	NA	NA	0.58	0.75	0.26	NA	NA	2.32	2.49	ZZZ
G0308		A	ESRD related svc 4+mo < 2yrs	12.74	5.43	7.78	5.43	7.78	0.42	18.59	20.94	18.59	20.94	XXX
G0309		A	ESRD related svc 2–3mo <2yrs	10.61	4.77	6.53	4.77	6.53	0.36	15.74	17.50	15.74	17.50	XXX
G0310		A	ESRD related svc 1 vst <2yrs	8.49	2.79	4.97	2.79	4.97	0.28	11.56	13.74	11.56	13.74	XXX
G0311		A	ESRD related svs 4+mo 2–11yr	9.73	3.50	4.42	3.50	4.42	0.34	13.57	14.49	13.57	14.49	XXX
G0312		A	ESRD relate svs 2–3 mo 2–11y	8.11	2.60	3.60	2.60	3.60	0.29	11.00	12.00	11.00	12.00	XXX
G0313		A	ESRD related svs 1 mon 2–11y	6.49	1.80	2.81	1.80	2.81	0.22	8.51	9.52	8.51	9.52	XXX
G0314		A	ESRD related svs 4+ mo 12–19	8.28	3.36	4.16	3.36	4.16	0.27	11.91	12.71	11.91	12.71	XXX
G0315		A	ESRD related svs 2–3mo/12–19	6.90	2.55	3.40	2.55	3.40	0.23	9.68	10.53	9.68	10.53	XXX
G0316		A	ESRD related svs 1vis/12–19y	5.52	1.65	2.63	1.65	2.63	0.17	7.34	8.32	7.34	8.32	XXX
G0317		A	ESRD related svs 4+mo 20+yrs	5.09	2.23	2.71	2.23	2.71	0.17	7.49	7.97	7.49	7.97	XXX
G0318		A	ESRD related svs 2–3 mo 20+y	4.24	1.67	2.21	1.67	2.21	0.14	6.05	6.59	6.05	6.59	XXX
G0319		A	ESRD related svs 1visit 20+y	3.39	1.12	1.71	1.12	1.71	0.11	4.62	5.21	4.62	5.21	XXX
G0320		A	ESD related svs home undr 2	10.61	2.59	5.99	2.59	5.99	0.36	13.56	16.96	13.56	16.96	XXX
G0321		A	ESRDrelatedsvs home mo 2–11y	8.11	1.92	3.43	1.92	3.43	0.29	10.32	11.83	10.32	11.83	XXX
G0322		A	ESRD related svs hom mo12–19	6.90	1.67	3.18	1.67	3.18	0.23	8.80	10.31	8.80	10.31	XXX
G0323		A	ESRD related svs home mo 20+	4.24	1.12	2.07	1.12	2.07	0.14	5.50	6.45	5.50	6.45	XXX
G0324		A	ESRD relate svs home/dy <2yr	0.35	0.16	0.22	0.16	0.22	0.01	0.52	0.58	0.52	0.58	XXX
G0325		A	ESRD relate home/day/ 2–11yr	0.23	0.09	0.11	0.09	0.11	0.01	0.33	0.35	0.33	0.35	XXX
G0326		A	ESRD relate home/dy 12–19yr	0.27	0.10	0.12	0.10	0.12	0.01	0.38	0.40	0.38	0.40	XXX
G0327		A	ESRD relate home/dy 20+yrs	0.14	0.06	0.08	0.06	0.08	0.01	0.21	0.23	0.21	0.23	XXX
G0329		A	Electromagntic tx for ulcers	0.06	0.16	0.15	0.01	0.02	0.01	0.23	0.22	0.08	0.09	XXX
G0337		X	Hospice evaluation preelecti	1.34	0.30	0.46	0.30	0.46	0.09	1.73	1.89	1.73	1.89	XXX
G0341		A	Insertion of catheter, vein	6.98	3.02	5.07	2.18	2.50	0.55	10.55	12.60	9.71	10.03	000
G0342		A	Laparo cholecystectomy/graph	11.98	NA	NA	5.06	5.25	1.58	NA	NA	18.62	18.81	090
G0343		A	Incision of bile duct	21.86	NA	NA	8.44	8.70	2.62	NA	NA	32.92	33.18	090
G0344		A	Office/outpatient visit, new	1.34	1.09	1.12	0.41	0.46	0.09	2.52	2.55	1.84	1.89	XXX
G0364		A	Bone marrow aspirate &biopsy	0.16	0.17	0.15	0.07	0.06	0.04	0.37	0.35	0.27	0.26	ZZZ
G0365		A	Doppler flow testing	0.25	5.44	4.36	NA	NA	0.26	5.95	4.87	NA	NA	XXX
G0365	26	A	Doppler flow testing	0.25	0.07	0.09	0.07	0.09	0.03	0.35	0.37	0.35	0.37	XXX
G0365	TC	A	Doppler flow testing	0.00	5.37	4.28	NA	NA	0.23	5.60	4.51	NA	NA	XXX
G0366		A	Electrocardiogram, complete	0.17	0.35	0.47	NA	NA	0.03	0.55	0.67	NA	NA	XXX
G0367		A	Electrocardiogram, tracing	0.00	0.28	0.41	NA	NA	0.02	0.30	0.43	NA	NA	XXX
G0368		A	Electrocardiogram report	0.17	0.07	0.06	0.07	0.06	0.01	0.25	0.24	0.25	0.24	XXX
G0372		A	MD service required for PMD	0.17	0.04	0.30	0.04	0.06	0.01	0.22	0.48	0.22	0.24	XXX
G0375		A	Smoke/tobacco counselng 3–10	0.24	0.07	0.09	0.07	0.09	0.01	0.32	0.34	0.32	0.34	XXX
G0376		A	Smoke/tobacco counseling >10	0.48	0.13	0.17	0.13	0.16	0.01	0.62	0.66	0.62	0.65	XXX
M0064		A	Visit for drug monitoring	0.37	0.87	0.47	0.06	0.11	0.01	1.25	0.85	0.44	0.49	XXX
P3001		A	Cytopath, c/v, interpret	0.42	0.38	0.21	0.38	0.21	0.02	0.82	0.65	0.82	0.65	XXX
Q0035		A	Cardiokymography	0.17	0.30	0.41	NA	NA	0.03	0.50	0.61	NA	NA	XXX
Q0035	26	A	Cardiokymography	0.17	0.05	0.06	0.05	0.06	0.01	0.23	0.24	0.23	0.24	XXX
Q0035	TC	A	Cardiokymography	0.00	0.25	0.36	NA	NA	0.02	0.27	0.38	NA	NA	XXX
Q0091		A	Obtaining screen pap smear	0.37	0.75	0.69	0.10	0.13	0.02	1.14	1.08	0.49	0.52	XXX
Q0092		A	Set up port xray equipment	0.00	0.46	0.36	NA	NA	0.01	0.47	0.37	NA	NA	XXX

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[3] Indicates RVUs are not used for Medicare payment.

ADDENDUM C.—CODES WITH WORK RVUS SUBJECT TO COMMENT

CPT Code [1]	Mod	Descriptor	Proposed work RVU
00797		Anesth, Surgery for Obesity	11.00
10060		Drainage of skin abscess	1.17
11040		Debride skin, partial	0.50
11041		Debride skin, full	0.82
11042		Debride skin/tissue	1.12
11100		Biopsy, skin lesion	0.81
11400		Exc tr-ext b9+marg 0.5<cm	0.85
11401		Exc tr-ext b9+marg 0.6-1cm	1.23
11402		Exc tr-ext b9+marg 1.1-2 cm	1.40
11403		Exc tr-ext b9+marg 2.1-3 cm	1.79
11404		Exc tr-ext b9+marg 3.1-4 cm	2.06
11406		Exc tr-ext b9+marg >4.0cm	3.45
11420		Exc h-f-nk-sp b9+marg 0.5<	0.98
11421		Exc h-f-nk-sp b9+marg 0.6-1	1.42
11422		Exc h-f-nk-sp b9+marg 1.1-2	1.63
11423		Exc h-f-nk-sp b9+marg 2.1-3	2.01
11424		Exc h-f-nk-sp b9+marg 3.1-4	2.43
11426		Exc h-f-nk-sp b9+marg >4.0 cm	4.02
11440		Exc face-mm b9+marg 0.5 < cm	1.00
11441		Exc face-mm b9+marg 0.6-1 cm	1.48
11442		Exc face-mm b9+marg 1.1-2 cm	1.72
11443		Exc face-mm b9+marg 2.1-3 cm	2.29
11444		Exc face-mm b9+marg 3.1-4 cm	3.14
11446		Exc face-mm b9+marg >4 cm	4.73
11600		Exc tr-ext mlg+marg 0.5<cm	1.56
11601		Exc tr-ext mlg+marg 0.6-1cm	2.00
11602		Exc tr-ext mlg+marg 1.1-2cm	2.20
11603		Exc tr-ext mlg+marg 2.1-3<cm	2.75
11604		Exc tr-ext mlg+marg 3.1-4cm	3.10
11606		Exc tr-ext mlg+marg >4cm	4.95
11620		Exc h-f-nk-sp mlg+marg 0.5<	1.57
11621		Exc h-f-nk-sp mlg+marg 0.6-1	2.01
11622		Exc h-f-nk-sp mlg+marg 1.1-2	2.34
11623		Exc h-f-nk-sp mlg+marg 2.1-3	3.04
11624		Exc h-f-nk-sp mlg+marg 3.1-4	3.55
11626		Exc h-f-nk-sp mlg+marg >4cm	4.54
11640		Exc face-mm malig+marg 0.5<	1.60
11641		Exc face-mm malig+marg 0.6-1	2.10
11642		Exc face-mm malig+marg 1.1-2	2.55
11643		Exc face-mm malig+marg 2.1-3	3.35
11644		Exc face-mm malig+marg 3.1-4	4.27
11646		Exc face-mm malig+marg>4	6.19
11730		Removal of nail plate	1.13
12052		Layer closure of wound(s)	2.77
13121		Repair of wound or lesion	4.32
14040		Skin tissue rearrangement	8.36
14060		Skin tissue rearrangement	8.99
15100		Skin split graft	9.66
15240		Skin full graft	10.03
15734		Muscle-skin graft, trunk	19.52
17003		Destroy lesions, 2-14	0.07
17004		Destroy lesions, 15 or more	1.58
17262		Destruction of skin lesions	1.58
17281		Destruction of skin lesions	1.72
19180		Removal of breast	15.61
20600		Drain/inject, joint/bursa	0.66
20610		Drain/inject, joint/bursa	0.79
20680		Removal of support implant	5.86
21145		Reconstruct midface, lefort	23.52
21146		Reconstruct midface, lefort	24.41
21147		Reconstruct midface, lefort	26.01
21395		Treat eye socket fracture	14.58
22520		Percut vertebroplasty thor	9.15
22554		Neck spine fusion	17.48
22612		Lumbar spine fusion	22.50
22840		Insert spine fixation device	12.52
24363		Replace elbow joint	22.39

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Note: The proposed work RVUs for 10- and 90-day global period codes include the application of the RUC- recommended values for the E/M services that are included as part of the global period for the service.

ADDENDUM C.—CODES WITH WORK RVUS SUBJECT TO COMMENT—Continued

CPT Code [1]	Mod	Descriptor	Proposed work RVU
24430		Repair of humerus	14.99
25447		Repair wrist joint(s)	10.85
26055		Incise finger tendon sheath	2.94
26160		Remove tendon sheath lesion	3.40
26600		Treat metacarpal fracture	2.40
26951		Amputation of finger/thumb	5.75
27130		Total hip arthroplasty	17.40
27236		Treat thigh fracture	14.54
27447		Total knee arthroplasty	20.81
27465		Shortening of thigh bone	18.36
27470		Repair of thigh	16.87
27709		Incision of tibia and fibula	17.24
27880		Amputation of lower leg	15.18
28805		Amputation thru metatarsal	12.47
29075		Application of forearm cast	0.77
29580		Application of paste boot	0.57
30520		Repair of nasal septum	7.63
31225		Removal of upper jaw	26.34
31230		Removal of upper jaw	30.46
31360		Removal of larynx	27.23
31365		Removal of larynx	34.85
31367		Partial removal of larynx	27.11
31368		Partial removal of larynx	33.73
31370		Partial removal of larynx	27.11
31375		Partial removal of larynx	25.61
31380		Partial removal of larynx	25.11
31382		Partial removal of larynx	28.11
31390		Removal of larynx & pharynx	38.72
31395		Reconstruct larynx & pharynx	43.34
31575		Diagnostic laryngoscopy	1.10
31579		Diagnostic laryngoscopy	2.26
31622		Dx bronchoscope/wash	2.78
32141		Remove treat lung lesions	17.14
32442		Sleeve pneumonectomy	37.74
32445		Removal of lung	40.73
32484		Segmentectomy	22.67
32486		Sleeve lobectomy	31.72
32488		Complection pneumonectomy	32.69
32540		Removal of lung lesion	23.68
32651		Thoracoscopy, surgical	16.28
32652		Thoracoscopy, surgical	23.34
32653		Thoracoscopy, surgical	19.86
32654		Thoracoscopy, surgical	18.49
32655		Thoracoscopy, surgical	14.95
32657		Thoracoscopy, surgical	14.54
32662		Thoracoscopy, surgical	17.00
32663		Thoracoscopy, surgical	19.96
32665		Thoracoscopy, surgical	17.37
32815		Close bronchial fistula	37.94
33140		Heart vevascularize (lmr)	22.72
33141		Heart lmr w/other procedure	4.83
33208		Insertion of heart pacemaker	8.12
33300		Repair of heart wound	29.93
33305		Repair of heart wound	33.67
33400		Repair of aortic valve	39.23
33405		Replacement of aortic valve	39.97
33406		Repacement of aortic valve	48.87
33410		Replacement of aortic valve	38.69
33411		Replacement of aortic valve	57.11
33413		Replacement of aortic valve	55.27
33414		Repair of aortic valve	39.27
33415		Revision, subvalvular tissue	29.70
33416		Revise ventricule muscle	36.39
33425		Repair of mitral valve	38.37
33426		Repair of mitral valve	41.28
33427		Repair of mitral valve	42.78
33430		Replacement of mitral valve	49.81

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ADDENDUM C.—CODES WITH WORK RVUS SUBJECT TO COMMENT—Continued

CPT Code [1]	Mod	Descriptor	Proposed work RVU
33460		Revision of tricuspid valve	27.97
33463		Valvuloplasty, tricuspid	42.57
33464		Valvuloplasty, tricuspid	30.93
33465		Replace tricuspid valve	33.58
33474		Revision of pulmonary valve	25.85
33475		Replacement, pulmonary valve	44.81
33505		Repair artery w/tunnel	38.33
33510		CABG, vein, single-vein single	33.45
33511		CABG, vein, two	34.59
33512		CABG, vein, three	38.73
33513		CABG, vein, four	39.69
33514		CABG, vein, five	40.50
33516		Cabg, vein, six or more	41.96
33517		CABG, artery	2.57
33518		CABG, artery-vein, two	4.84
33519		CABG, artery-vein, three	7.11
33521		CABG, artery-vein, four	9.39
33522		CABG, artery-vein, five	11.65
33523		Cabg, art-vein, six or more	13.93
33530		Coronary artery, bypass/reop	5.85
33533		CABG, arterial, single	37.38
33534		CABG, arterial, two	38.81
33535		CABG, arterial, three	41.48
33536		Cabg, arterial, four or more	40.79
33542		Removal of heart lesion	32.65
33545		Repair of heart demage	41.12
33641		Repair heart septum defect	28.47
33665		Repair of heart defects	34.75
33684		Repair heart septum defect	34.27
33688		Repair heart septum defect	34.65
33771		Repair great vessels defect	40.56
33779		Repair great vessels defect	43.13
33781		Repair great vessels defect	43.14
33860		Ascending aortic graft	43.13
33863		Ascending aortic graft	48.52
33877		Thoracoabdominal graft	57.75
33945		Transplantation of heart	50.14
34001		Removal of artery clot	17.74
34201		Removal of artery clot	18.40
34471		Removal of vein clot	20.94
35081		Repair defect of artery	33.31
35102		Repair defect of artery	36.31
35216		Repair blood vessel lesion	36.43
35506		Artery bypass graft	25.19
35508		Artery bypass graft	25.95
35515		Artery bypass graft	25.95
35516		Artery bypass graft	24.07
35556		Artery bypass graft	26.56
35566		Artery bypass graft	32.16
35583		Vein bypass graft	27.56
35585		Vein bypass graft	32.16
35606		Artery bypass graft	22.32
35616		Artery bypass graft	21.70
35820		Explore chest vessels	30.08
38100		Removal of spleen, total	19.43
38101		Removal of spleen, partial	19.43
38115		Repair of ruptured spleen	21.76
38700		Removal of lymph nodes, neck	12.62
38720		Removal of lymph nodes, neck	21.64
38724		Removal of lymph nodes, neck	23.64
39220		Removal chest lesion	18.42
39400		Visualization of chest	5.97
41100		Biopsy of tongue	1.37
41120		Partial removal of tongue	10.83
41130		Partial removal of tongue	15.43
41135		Tongue and neck surgery	29.71
41140		Removal of tongue	28.69

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ADDENDUM C.—CODES WITH WORK RVUS SUBJECT TO COMMENT—Continued

CPT Code [1]	Mod	Descriptor	Proposed work RVU
41145		Tongue removal, neck surgery	37.47
41150		Tongue, mouth, jaw surgery	29.40
41153		Tongue, mouth, neck surgery	33.16
41155		Tongue, jaw, & neck surgery	39.84
42120		Remove plate/lesion	11.62
42842		Extensive surgery of throat	11.94
42844		Extensive surgery of throat	17.49
42845		Extensive surgery of throat	32.27
42890		Partial removal of pharynx	18.84
42892		Revision of pharyngeal walls	25.67
42894		Revision of pharyngeal walls	33.49
43108		Removal of esophagus	63.23
43113		Removal of esophagus	46.95
43116		Partial removal of esophagus	71.39
43118		Partial removal of esophagus	52.07
43121		Partial removal of esophagus	46.35
43123		Partial removal of esophagus	63.83
43124		Removal of esophagus	64.63
43135		Removal of esophagus pouch	22.37
43235		Uppr gi endoscopy, diagnosis	2.39
43246		Place gastrostomy tube	4.32
43620		Removal of stomach	33.85
43621		Removal of stomach	39.34
43622		Removal of stomach	39.84
43632		Removal of stomach, partial	34.95
43633		Removal of stomach, partial	32.95
43634		Removal of stomach, partial	36.45
43750		Place gastrostomy tube	4.60
43820		Fusion of stomach and bowel	22.34
43840		Repair of stomach lesion	22.64
44120		Removal of small intenstive	20.70
44130		Bowel to bowel fusion	21.92
44140		Partial removal of colon	22.40
44141		Partial removal of colon	29.69
44143		Partial removal of colon	29.69
44144		Partial removal of colon	27.57
44145		Partial removal of colon	28.39
44146		Partial removal of colon	35.08
44147		Partial removal of colon	33.50
44150		Removal of colon	29.91
44151		Removal of colon/leostomy	34.65
44155		Removal of colon/leostomy	34.15
44156		Removal of colon/leostomy	37.15
44602		Suture, small intestine	24.60
44603		Suture, small intestine	27.97
45020		Drainage of rectal abscess	8.37
45300		Proctosigmoidoscopy w/bx	0.38
45303		Proctosigmoidoscoy dilate	0.44
45305		Procosigmoidoscopy w/bx	1.01
45307		Proctosigmoidoscopy fb	0.94
45308		Proctosigmoidoscopy removal	0.83
45309		Proctosigmoidoscopy removal	2.01
45315		Proctosigmoidoscopy removal	1.40
45317		Proctosigmoidoscopy bleed	1.50
45320		Proctosigmoidoscopy ablate	1.58
45321		Proctosigmoidoscopy volvul	1.17
45327		Proctosigmoidoscopy w/slent	1.65
45330		Diagnostic sigmoidoscopy	0.96
45378		Diagnostic colonoscopy	3.69
46040		Incision of rectal abscess	5.20
46045		Incision of rectal abscess	5.75
46060		Incision of rectal abscess	6.18
46270		Removal of anal fistula	4.75
46275		Removal of anal fistula	5.25
46280		Removal of anal fistula	6.22
46285		Removal of anal fistula	5.25
46600		Diagnostic anoscopy	0.50

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Note: The proposed work RVUs for 10- and 90-day global period codes include the application of the RUC- recommended values for the E/M services that are included as part of the global period for the service.

ADDENDUM C.—CODES WITH WORK RVUS SUBJECT TO COMMENT—Continued

CPT Code [1]	Mod	Descriptor	Proposed work RVU
46604		Anoscopy and dilation	1.31
46606		Anoscopy and biopsy	0.81
46608		Anoscopy, remove for body	1.51
46610		Anoscopy, remove lesion	1.32
46611		Anoscopy	1.81
46612		Anoscopy, remove lesions	2.34
46614		Anoscopy, control bleeding	2.01
46615		Anoscopy	2.68
47562		Laparoscopic cholecystectomy	11.57
47600		Removal of gallbladder	15.44
47760		Fuse bile ducts and bowel	38.08
47765		Fuse liver ducts and bowel	51.95
47780		Fuse bile ducts and bowel	42.08
47785		Fuse bile ducts and bowel	55.95
49002		Reopening of abdomen	17.51
49010		Exploration behind abdomen	15.94
49505		Prp i/hern init reduc >5 yr	7.84
50590		Fragmenting of kidney stone	9.58
51720		Treatment of bladder lesion	1.50
51798		Us urine capacity measure	0.00
52000		Cystoscopy	2.23
52204		Cystoscopy	2.59
52601		Prostatectomy (TURP)	15.07
55700		Biopsy of prostate	2.58
57160		Insert pessary/other device	0.89
57240		Repair bladder & vagina	11.38
57250		Repair rectum & vagina	11.38
57260		Repair vagina	14.32
57265		Extensive repair of vagina	15.82
57288		Repair bladder defect	13.95
57500		Biopsy of cervix	1.20
58120		Dilation and curettage	3.52
58150		Total hysterectomy	17.17
58720		Removal of ovary/tube(s)	12.04
60600		Remove carotid body lesion	24.95
60605		Remove carotid body lesion	31.82
61154		Pierce skull & remove clot	16.86
61312		Open skull for drainage	30.03
61537		Removal of brain tissue	36.31
61538		Removal of brain tissue	39.31
61697		Brain aneurysm repr, complx	63.16
61698		Brain aneurysm repr, complx	69.39
61700		Brain aneurysm repr, simple	50.44
61702		Inner skull vessel surgery	59.80
62270		Spinal fluid tap, diagnostic	1.37
63047		Removal of spinal lamina	15.16
63048		Remove spinal lamina add-on	3.26
63075		Neck spine disk surgery	19.41
64702		Revise finger/toe nerve	6.02
64721		Carpal tunnel surgery	4.78
65426		Removal of eye lesion	5.85
65850		Incision of eye	11.14
66761		Revision of iris	4.81
66821		After cataract laser surgery	3.28
66984		Cataract surg w/iol, 1 stage	10.28
67221		Ocular photodynamic ther	3.45
67414		Explr/decompress eye socket	17.72
67445		Explr/decompress eye socket	18.90
67500		Inject/treat eye socket	1.44
67505		Inject/treat eye socket	1.27
67515		Inject/treat eye socket	1.40
67820		Revise eyelashes	0.71
67840		Remove eyelid lesion	2.04
67904		Repair eyelid defect	7.75
67911		Revise eyelid defect	7.30
67966		Revision of eyelid	8.75
68840		Explore/irrigate tear ducts	1.25

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Note: The proposed work RVUs for 10- and 90-day global period codes include the application of the RUC- recommended values for the E/M services that are included as part of the global period for the service.

ADDENDUM C.—CODES WITH WORK RVUS SUBJECT TO COMMENT—Continued

CPT Code [1]	Mod	Descriptor	Proposed work RVU
69210		Remove impacted ear wax	0.61
70355		Panoramic x-ray of jaws	0.20
71010		Chest x-ray	0.18
71020		Chest x-ray	0.22
71260		Ct thorax w/dye	1.24
72192		Ct pelvis w/o dye	1.09
72193		Ct pelvis w/dye	1.16
73100		X-ray exam of wrist	0.16
73110		X-ray exam of wrist	0.17
73120		X-ray exam of hand	0.16
73130		X-ray exam of hand	0.17
73140		X-ray exam of finger(s)	0.13
74000		X-ray exam of abdomen	0.18
74020		X-ray exam of abdomen	0.27
74022		X-ray exam series, abdomen	0.32
74150		Ct abdomen w/o dye	1.19
74160		Ct abdomen w/dye	1.27
76075		Dxa bone density, axial	0.20
76519		Echo exam of eye	0.54
76700		Us exam, abdom, complete	0.81
76830		Transvaginal us, non-ob	0.69
77263		Radiation therapy planning	3.14
77280		Set radiation therapy field	0.70
77290		Set radiation therapy field	1.56
77300		Radiation therapy dose plan	0.62
77315		Teletx isodose plan complex	1.56
77331		Special radiation dosimetry	0.87
77334		Radiation treatment aid(s)	1.24
77470		Special radiation treatment	2.09
78306		Bone imaging, whole body	0.86
78315		Bone imaging, 3 phase	1.02
78465		Heart image (3d), multiple	1.46
78478		Heart wall motion add-on	0.50
78480		Heart function add-on	0.30
88309		Tissue exam by pathologist	2.80
88321		Microslide consultation	1.63
88323		Microslide consultation	1.83
88325		Comprehensive review of data	2.50
92083		Visual field examination(s)	0.50
92226		Special eye exam, subsequent	0.33
92235		Eye exam with photos	0.81
92250		Eye exam with photos	0.44
93010		Electrocardiogram report	0.17
93015		Cardiovascular stress test	0.75
93018		Cardiovascular stress test	0.30
94010		Breathing capacity test	0.17
95144		Antigen therapy services	0.06
95165		Antigen therapy services	0.06
95816		Eeg, awake and drowsy	1.08
95819		Eeg, awake and asleep	1.08
95861		Muscle test, 2 limbs	1.54
95872		Muscle test, one fiber	2.00
95900		Motor nerve conduction test	0.42
95904		Sense nerve conduction test	0.34
95925		Somatosensory testing	0.54
95926		Somatosensory testing	0.54
95927		Somatosensory testing	0.54
95953		EEG monitoring/computer	3.30
99201		Office/outpatient visit, new	0.45
99202		Office/outpatient visit, new	0.88
99203		Office/outpatient visit, new	1.34
99204		Office/outpatient visit, new	2.30
99205		Office/outpatient visit, new	3.00
99211		Office/outpatient visit, est	0.17
99212		Office/outpatient visit, est	0.45
99213		Office/outpatient visit, est	0.92
99214		Office/outpatient visit, est	1.42

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Note: The proposed work RVUs for 10- and 90-day global period codes include the application of the RUC- recommended values for the E/M services that are included as part of the global period for the service.

ADDENDUM C.—CODES WITH WORK RVUS SUBJECT TO COMMENT—Continued

CPT Code [1]	Mod	Descriptor	Proposed work RVU
99215		Office/outpatient visit, est	2.00
99221		Initial hospital care	1.88
99222		Initial hospital care	2.56
99223		Initial hospital care	3.78
99231		Subsequent hospital care	0.76
99232		Subsequent hospital care	1.39
99233		Subsequent hospital care	2.00
99238		Hospital discharge day	1.28
99239		Hospital discharge day	1.90
99241		Office consultation	0.64
99242		Office consultation	1.34
99243		Office consultation	1.88
99244		Office consultation	3.02
99245		Office consultation	3.77
99251		Initial inpatient consult	1.00
99252		Initial inpatient consult	1.50
99253		Initial inpatient consult	2.27
99254		Initial inpatient consult	3.29
99255		Initial inpatient consult	4.00
99281		Emergency dept visit	0.45
99282		Emergency dept visit	0.88
99283		Emergency dept visit	1.34
99284		Emergency dept visit	2.56
99285		Emergency dept visit	3.80
99291		Critical care, first hour	4.50
99292		Critical care, addl 30 min	2.25

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Note: The proposed work RVUs for 10- and 90-day global period codes include the application of the RUC- recommended values for the E/M services that are included as part of the global period for the service.

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Federal Register

Thursday,
June 29, 2006

Part III

Election Assistance Commission

Publication of State Plan Pursuant to the Help America Vote Act; Notice

ELECTION ASSISTANCE COMMISSION

Publication of State Plan Pursuant to the Help America Vote Act

AGENCY: U.S. Election Assistance Commission (EAC).

ACTION: Notice.

SUMMARY: Pursuant to sections 254(a)(11)(A) and 255(b) of the Help America Vote Act (HAVA), Public Law 107–252, the U.S. Election Assistance Commission (EAC) hereby causes to be published in the **Federal Register** material changes to the HAVA State plan previously submitted by American Samoa.

DATES: This notice is effective June 29, 2006.

FOR FURTHER INFORMATION CONTACT: Bryan Whitener, Telephone 202–566–3100 or 1–866–747–1471 (toll-free).

Submit Comments: Any comments regarding the plans published herewith should be made in writing to the chief election official of the individual State at the address listed below.

SUPPLEMENTARY INFORMATION: On March 24, 2004, the U.S. Election Assistance Commission published in the **Federal Register** the original HAVA State plans filed by the fifty States, the District of Columbia and the Territories of American Samoa, Guam, Puerto Rico, and the U.S. Virgin Islands. 69 FR 14002. HAVA anticipated that States, Territories and the District of Columbia would change or update their plans from time to time pursuant to HAVA section 254(a)(11) through (13). HAVA sections 254(a)(11)(A) and 255 require EAC to publish such updates. EAC has not previously published an update to the American Samoa State plan.

The submission from American Samoa addresses material changes in the State budget of its previously submitted State plan and, in accordance with HAVA section 254(a)(12), provides information on how the State succeeded in carrying out its previous State plan. The amendment specifically focuses on using a majority of the requirements payments received by American Samoa to construct a new hurricane proof central elections office for the territory. American Samoa's new central election office will provide classroom space for voter education and election official training, expanded walkways and hallways, and construct elevators or ramps for easier access by voters with disabilities, and provide additional parking for better access by voters.

Upon the expiration of thirty days from June 29, 2006, American Samoa will be eligible to implement the material changes addressed in the plan that is published herein, in accordance with HAVA section 254(a)(11)(C).

EAC notes that the plan published herein has already met the notice and comment requirements of HAVA section 256, as required by HAVA section 254(a)(11)(B). EAC wishes to acknowledge the effort that went into revising this State plan and encourages further public comment, in writing, to the State election official listed below.

Chief State Election Officials

American Samoa

Mr. Soliai T. Fuimaono, Chief Election Official, American Samoa Election Office, P.O. Box 3970, Pago Pago, American Samoa 96799, Phone: (684) 633–2522, Fax: (684) 633–7116, E-mail: *Asgelect@samoatelco.com.*

Thank you for your interest in improving the voting process in America.

Dated: June 21, 2006.

Paul S. DeGregorio,

Chairman, U.S. Election Assistance Commission.

BILLING CODE 6820–KF–P

ELECTION OFFICE
American Samoa Government
P.O. Box 3970
Pago Pago, American Samoa 96799

HON. TOGIOLA T.A. TULAFONO,
Governor

HON. AITOFELE T.F. SUNIA,
Lt. Governor

SOLIAI T. FUIMAONO
Chief Election Officer

Phone: (684) 633-2522
Fax: (684) 633-7116

March 22, 2006

Peggy Sims
Research Specialist
U.S. Election Assistance Commission
1225 New York Ave, NW – Ste 1100
Washington, DC 20005

RE: American Samoa's Updated State Plan

Dear Ms. Sims:

Pursuant to HAVA, Section 255(b), please find enclosed a hard copy and disk copy of the Territory of American Samoa's Updated State Plan (2005-2006), which is hereby transmitted to the Election Assistance Commission for publication in the Federal Register. (A copy of this letter and document on this disk will be simultaneously sent to you via email at psims@eac.gov with copy to ecortes@eac.gov.)

The Updated State Plan complies with HAVA §253(b)(1): it contains each of the elements described in HAVA §254; was developed in accordance with HAVA §255; and meets the public notice and comment requirements of HAVA §256.

Thank you for your consideration.

Sincerely,

SOLIAI T. FUIMAONO
Chief Election Officer

encl.

TERRITORY OF AMERICAN SAMOA

State Plan

As required by Public Law 107-252
Help America Vote Act 2002, Section 253(b)

Soliai T. Fuimaono
Chief Election Officer
P. O. Box 3970
Pago Pago, American Samoa 96799

March 22, 2006

INTRODUCTION BY THE CHIEF ELECTION OFFICER

I am pleased to offer American Samoa's updated State Plan for implementing the Help America Vote Act of 2002 (HAVA). The Act significantly reforms the election process for federal elections, and American Samoa welcomes the opportunity to be a part of the process.

This State plan describes how American Samoa met or will meet the requirements set out by HAVA as described in American Samoa's preliminary State plan and reflects changes American Samoa has made since the release of its preliminary State plan to bring the Territory in compliance with HAVA

The major change in this State Plan from American Samoa's preliminary State plan is the incorporation of the central Election office relocation and the revision of the budget to provide for this relocation. In order to improve the administration of elections, American Samoa's central Election office must be expanded to make classroom space for voter education and election official training, expand walkways and hallways, and construct elevators or ramps for easier access by voters with disabilities, provide additional parking for better access by voters, and make such other physical changes necessary to comply with title III requirements.

The State Plan will be updated and refined as necessary over time, to reflect election law changes and future plans. The Election Office, through its in-house HAVA Coordinator, and the State Plan Committee, will continue their efforts to fulfill the intent of HAVA.

I am pleased to report that American Samoa currently complies with most of the requirements of HAVA. This State Plan serves as the framework for continuing progress in election reform, and achieving full compliance with those portions of HAVA for which American Samoa is not yet in compliance.

Soliai T. Fuimaono
Chief Election Officer

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I. INTRODUCTION

The Help America Vote Act (HAVA) was signed into law on October 29, 2002 by the President of the United States. HAVA requires each State and Territory to develop a comprehensive plan for implementing mandates aimed at improving the conduct of elections.

Each plan must address the following:

* Provide for disabled voters the opportunity to vote independently through the use of at least one (1) Direct Recording Electronic (DRE) voting system in each polling place.

* Implement a system of provisional voting.

* Provide a complaints process where voters are entitled to a public hearing after filing a valid notarized complaint.

* Establish a statewide voter registration system.

* Establish a toll free number for voters to call to receive pertinent voting information.

The following State Plan for the Territory of American Samoa was developed in accordance with Section 254 of HAVA and under the direction of the Chief Election Officer. America Samoa's plan establishes a framework for the Territory to continue progress that was already in place before HAVA, and to achieve compliance with HAVA.

Because HAVA may have a profound impact on some aspects of the voting process in our Territory, we anticipate that this Plan will require updating and refining over the upcoming years to address changes and developing requirements.

II. BACKDROP FOR AMERICAN SAMOA'S STATE PLAN

Pursuant to American Samoa Code Annotated (ASCA), Title 6, the Chief Election Officer is responsible for the supervision of all elections in the Territory. American Samoa has had and continues to have a territory-wide, uniform, and standardized election system – something HAVA mandates each State and Territory to have. All services are provided in a uniform and nondiscriminatory manner.

A. Overview

The Territory of American Samoa consists of seven islands, six (6) of which are

inhabited: the main island of Tutuila, the island of Aunu'u, the Manu'a islands of Ta'u, Ofu and Olosega, and Swains Island. The population on each island (based on the American Samoa Statistical Yearbook 2000) is as follows:

Tutuila	55,400
Aunu'u	476
Ta'u	873
Ofu	289
Olosega	216
Swains	37

B. Election Contests

The following election contests are concurrently held: federal election contests and territorial elections. These elections are held in even numbered years.

Federal Contests:

Delegate to the U.S. House of Representatives (1 seat)

Territory-wide Contests:

Governor (1 seat)
Lieutenant Governor (1 seat)
Representatives (20 seats)

Ballot issues include amendments to the Revised Constitution of American Samoa.

C. Voter Registration

Voter registration from 1994 to 2004 were (numbers based on General Elections):

2004	16,102
2002	14,778
2000	15,598
1998	14,526
1996	14,498
1994	11,138

D. Voter Turnout

Voter turnout numbers from 1994 to 2004 were (numbers based on General Elections):

2004	12,079
2002	10,394
2000	12,080
1998	9,415
1996	11,088
1994	10,236

E. Polling Stations

In 2004, there were forty-five (45) polling stations territory-wide. In 2006, the Election Office does not anticipate a change in the total number of polling stations.

F. Vote Counting

American Samoa has had and continues to have a uniform, standard, and territory-wide election system, something HAVA mandates each State and Territory to have.

American Samoa uses paper ballots, which are counted manually at each polling station upon the close of polls. Paper ballots are used in every polling place, as well as at the absentee walk-in polling place (early voting site) located at the central Election Office. The processing and tabulation of the absentee mail ballots are handled by the staff at the central Election Office. The consolidation and distribution of election results are carried out at the central Election Office.

G. Absentee Walk-In Polling Place (Early Voting Site)

Absentee voting commences when the candidates are certified, and the ballots are printed. An absentee walk-in polling place is maintained at the central Election Office for early voting. The site opens upon commencement of absentee voting and closes at 4:30 p.m. on the day prior to the election.

H. Polling Station Officials

Territory-wide training of approximately 250 polling station officials begins in early October and continues through November of an election year. The Election Office conducts all training sessions. Close to one-third (1/3) of polling station officials from a previous election are usually hired back to conduct subsequent elections.

III. STATE PLAN REQUIRED ELEMENTS (HAVA §254)

A. MEETING TITLE III REQUIREMENTS AND OTHER ACTIVITIES

How American Samoa will use the requirements payments to meet the requirements of title III, and, if applicable under section 251(b)(2), to carry out other activities to improve the administration of elections.

1. Voting System Standards

Title III requirements for uniform and non-discriminatory election technology and administration are specified in HAVA section 301. The chart below takes each of the Voting System Standards and describes American Samoa's plan to meet the requirement.

Section 301(a) Voting Systems Standards	Status			Implementation
	Meets Requirement	Meets Requirement Partially	New Capability to be Implemented	
(a) REQUIREMENTS – Each voting system used in an election for Federal office shall meet the following requirements:				
(1) IN GENERAL -				
(A) Except as provided in subparagraph (B), the voting system . . . shall -				
(i) permit the voter to verify (in a private and independent manner) the votes selected by the voter on the ballot before the ballot is cast and counted;	YES			At every polling place, the voter is provided a single covered stall to privately and independently mark his/her ballot.
(ii) provide the voter with the opportunity (in a private and independent manner) to change the ballot or correct any error before the ballot is cast and counted (including the opportunity to correct the error through the issuance of a replacement ballot if the voter was otherwise unable to change the ballot or correct any error); and	YES			American Samoa uses a paper ballot system in every polling place (as well as for absentee mail ballots). The voter is able to view, verify, and/or correct an error before casting a ballot. Furthermore, American Samoa law allows a voter to obtain a replacement ballot by returning the ballot that was completed in error.

NOTE: American Samoa's State Plan as presented herein is limited to the extent local appropriations are made available and based on the assumption that adequate federal funding will be appropriated. American Samoa intends to fully comply with HAVA; however, if adequate federal funding is not made available, the manner in which the funds are dedicated may be altered from the information contained in this State Plan.

Section 301(a) Voting Systems Standards	Status			Implementation
	Meets Requirement	Meets Requirement Partially	New Capability to be Implemented	
(iii)If the voter selects votes for more than 1 candidate for a single office – (I) notify the voter that the voter has selected more than 1 candidate for a single office on the ballot; (II) notify the voter before the ballot is cast and counted of the effect of casting multiple votes for office; and, (III) provide the voter with the opportunity to correct the ballot before the ballot is cast and counted. . .				
(B) A State or jurisdiction that uses a paper ballot voting system . . . (including mail-in absentee ballots and mail-in ballots), may meet the requirements of subparagraph A(iii) by –				
(i) establishing a voter education program specific to that voting system that notifies each voter of the effect of casting multiple votes for an office; and	YES			Voter education will be conducted on what constitutes a vote, the effect of casting multiple votes for an office, and the procedures for correcting an error through the issuance of a replacement ballot.
(ii) providing the voter with instructions on how to correct the ballot before it is cast and counted (including instructions on how to correct the error through the issuance of a replacement ballot if the voter was otherwise unable to change the ballot or correct any error).	YES			Each voter is instructed on how to correct the ballot before it is cast and counted (including instructions on how to correct the error through the issuance of a replacement ballot if the voter was otherwise unable to change the ballot or correct any error).
(C) The voting system shall ensure that any notification required under this paragraph preserves the privacy of the voter and the confidentiality of the ballot.	YES			Instructions mentioned in B(ii) are posted inside the polling place.
(2) AUDIT CAPACITY -				
(A) IN GENERAL – The voting system shall produce a record with an audit capacity for such system.	YES			American Samoa's voting system currently used has the necessary audit capacity.

Section 301(a) Voting Systems Standards	Status			Implementation
	Meets Requirement	Meets Requirement Partially	New Capability to be Implemented	
(B) MANUAL AUDIT CAPACITY -				
(i) The voting system shall produce a permanent paper record with a manual audit capacity for such system.	YES			Upon the close of polls, all paper ballots are manually counted and the results tabulated at each polling station. The results of each polling station are forwarded to the Central Election Office, where Election Office staff verify the tabulations before announcing the results live on territory-wide television.
(ii) The voting system shall provide the voter with an opportunity to change the ballot or correct any error before the permanent paper record is produced.				See Section 1(A)(ii).
(iii) The paper record produced under subparagraph (A) shall be available as an official record for any recount conducted with respect to any election in which the system is used.	YES			All paper ballots are securely maintained at the Central Election Office for any recount conducted with respect to any election.
(3) ACCESSIBILITY FOR INDIVIDUALS WITH DISABILITIES – The voting system shall -				
(A) be accessible for individuals with disabilities, including non-visual accessibility for the blind and visually impaired, in a manner that provides the same opportunity for access and participation (including privacy and independence) as for other voters;	YES			American Samoa election law provides that a physically disabled or visually impaired voter be assisted by two election officials, or a person of the voter's choice, in the marking of a ballot.
(B) satisfy the requirement of subparagraph (A) through the use of at least one direct recording electronic voting system or other voting system equipped for individuals with disabilities at each polling place; and	YES			American Samoa will allow individuals with disabilities access to the polling places by instituting a voter system equipped for such individuals. The Election Office is working closely with the Office of Protection and Advocacy for the Disabled to identify the voter system that best suits American Samoa

Section 301(a) Voting Systems Standards	Status			Implementation
	Meets Requirement	Meets Requirement Partially	New Capability to be Implemented	
				voters' needs.
(C) if purchased with funds made available under title II on or after January 1, 2007, meet the voting system standards for disability access (as outlined in this paragraph).				Does not apply at this time.
(4) ALTERNATIVE LANGUAGE ACCESSIBILITY – The voting system shall provide alternative language accessibility pursuant to the requirements of section 203 of the Voting Rights Act of 1965 (42 U.S.C. 1973aa-1a).	YES			All voter information is provided in both English and Samoan, the native language of American Samoans.
(5) ERROR RATES – The error rate of the voting system in counting ballots (determined by taking into account only those errors which are attributable to the voting system and not attributable to an act of the voter) shall comply with the error rate standards established under section 3.2.1 of the Commission which are in effect on the date of enactment of this Act.	YES			All ballots are manually counted and the results tabulated at each individual polling station. The manual counting is public, witnessed by candidates or their designees, observers, voters, the media and any interested persons. Because American Samoa's ballots are manually counted (and recounted) in public, AS's error rate of the voting system in *counting* ballots fully complies with the error rates established by the Commission.
(6) UNIFORM DEFINITION OF WHAT CONSTITUTES A VOTE – Each State shall adopt uniform and nondiscriminatory standards that define what constitutes a vote and what will be counted as a vote for each category of voting system used in the State.	YES			The High Court of American Samoa has long determined what constitutes a vote; the definition is uniform & nondiscriminatory and is followed in all AS elections. See *Mulitauaopele v. CEO, AP No. 20-94 (1994).*

2. Provisional Voting & Voting Information Requirements

The chart below takes each of the Provisional Voting and Voting Information requirements and describes American Samoa's plan to meet the requirement.

Section 302 Provisional Voting & Voting Information Requirements	Status			Implementation
	Meets Requirement	Meets Requirement Partially	New Capability to be Implemented	
(a) PROVISIONAL VOTING REQUIREMENTS – If an individual declares that such individual is a registered voter in the jurisdiction in which the individual desires to vote and that the individual is eligible to vote in an election for Federal office, but the name of the individual does not appear on the official list of eligible voters for the polling place or an election official asserts that the individual shall be permitted to cast a provisional ballot as follows:				
(1) An election official at the polling place shall notify the individual that the individual may cast a provisional ballot in that election.	YES			American Samoa meets this requirement. If the name of any voter is not found on the polling place voter registration list, an election official will contact the Central Election Office to search the voter registration database to determine if the individual is registered to vote. If the voter's name is not in the voter registration system, the voter is allowed to cast a ballot, which is sealed and marked for a later eligibility determination.
(2) The individual shall be permitted to cast a provisional ballot at that polling place upon the execution of a written affirmation by the individual before an election official at the polling place stating that the individual is (a) registered voter in the jurisdiction in which the individual desires to vote; and (b) eligible to vote in that	YES			American Samoa meets this requirement. See section a(1) above.

Section 302 Provisional Voting & Voting Information Requirements	Status			Implementation
	Meets Requirement	Meets Requirement Partially	New Capability to be Implemented	
election.				
(3) An election official at the polling place shall transmit the ballot cast by the individual or the voter information contained in the written affirmation executed by the individual under paragraph (2) to an appropriate State or local election official for prompt verification under paragraph (4).	YES			All provisional ballots are submitted forthwith to the Board of Registration for determination. The Board sits on the day of every Territorial and Federal election.
(4) If the appropriate State or local election official to whom the ballot or voter information is transmitted under paragraph (3) determines that the individual is eligible under State law to vote, the individual's provisional ballot shall be counted as a vote in that election in accordance with State law.	YES			If the Board of Registration determines that the individual is eligible under American Samoa law to vote, the individual's provisional ballot shall be counted as a vote in that election.
(5)(A) At the time that an individual casts a provisional ballot, the appropriate State or local election official shall give the individual written information that states that any individual who casts a provisional ballot will be able to ascertain under the system established under subparagraph (B) whether the vote was counted, and, if the vote was not counted, the reason that the vote was not counted.	YES			American Samoa meets this requirement. This information is provided to all voters in the AS "voter information" educational pamphlets.
(B) The appropriate State or local election official shall establish a free access system (such as a toll-free telephone number or an Internet website) that any individual who casts a provisional ballot may access to discover whether the vote of that individual was counted, and, if the vote was not counted, the reason that the vote was not counted.	YES			A toll-free telephone number is activated in order for individuals to find out whether their vote was counted and if not counted, the reason therefore.
(b) VOTING INFORMATION REQUIREMENTS-				

Section 302 Provisional Voting & Voting Information Requirements	Status			Implementation
	Meets Requirement	Meets Requirement Partially	New Capability to be Implemented	
(1) PUBLIC POSTING ON ELECTION DAY – The appropriate State or local election official shall cause voting information to be publicly posted at each polling place on the day of each election for Federal office.	YES			American Samoa meets this requirement. All voter information is posted at each polling station on the day of all elections
(2) VOTING INFORMATION DEFINED – In this section, the term "voting information" means-				
(A) a sample version of the ballot that will be used for that election;	YES			American Samoa meets this requirement. Election officials at each polling station are required to display a sample ballot of each respective office.
(B) information regarding the date of the election and the hours during which polling places will be open;	YES			American Samoa meets this requirement. AS law requires that the Chief Election Officer issue a proclamation that provides this information.
(C) instructions for how to vote, including how to cast a vote and how to cast a provisional ballot;	YES			American Samoa meets this requirement. This information is provided to all voters in the AS "voter information" educational pamphlet.
(D) instructions for mail-in registrants and first-time voters under section 303(b);	YES			American Samoa meets this requirement. This information is provided to all voters in the AS "voter information" educational pamphlet.
(E) general information on voting rights under applicable Federal and State laws, including information on the right of an individual to cast a provisional ballot and instructions on how to contact the appropriate officials if these rights are alleged to have been violated; and	YES			American Samoa meets this requirement. This information is provided to all voters in the AS "voter information" educational pamphlet.
(F) general information on Federal and State laws regarding prohibitions on acts of fraud and misrepresentations.	YES			American Samoa meets this requirement. This information is provided to all voters in the AS "voter information" educational pamphlet.

Section 302 Provisional Voting & Voting Information Requirements	Status			Implementation
	Meets Requirement	Meets Requirement Partially	New Capability to be Implemented	
(c) VOTERS WHO VOTE AFTER THE POLLS CLOSE – Any individual who votes in an election for Federal office as a result of a Federal or State court order or any other order extending the time established for closing the polls by a State law in effect 10 days before the date of that election may only vote in that election by casting as provisional ballot under subsection (a). Any such ballot cast under the preceding sentence shall be separated and held apart from other provisional ballots cast by those not affected by the order.	YES			American Samoa will comply with all court procedures for provisional ballots cast by voters in accordance with any court order extending the time established for closing the polls.

3. Computerized Territory-wide Voter Registration List & Voters Who Register by Mail

The chart below takes each of the requirements for Computerized Territory-wide Voter Registration List and Voters Who Register by Mail and describes American Samoa's plan to meet the requirement.

Section 303 Computerized Territory-wide Voter Registration List & Voters Who Register by Mail	Status			Implementation
	Meets Requirement	Meets Requirement Partially	New Capability to be Implemented	
(a) COMPUTERIZED TERRITORY-WIDE REGISTRATION LIST REQUIREMENTS				
(1) IMPLEMENTATION -				
(A) IN GENERAL – Each State, acting through the chief State election official, shall implement, in a uniform and nondiscriminatory manner, a single, uniform, official, centralized, interactive computerized statewide voter registration list defined, maintained, and administered at the State level that contains the	YES			American Samoa's existing voter registration system is a single, uniform, official, centralized, computerized, territory-wide voter register as required by HAVA. American Samoa's voter registration system (referred to throughout this section as "territory-wide voter list") is centralized and

Section 303 Computerized Territory-wide Voter Registration List & Voters Who Register by Mail	Status			Implementation
	Meets Requirement	Meets Requirement Partially	New Capability to be Implemented	
name and registration information of every legally registered voter in the State and assigns a unique identifier to each legally registered voter in the State (in this subsection referred to as the "computerized list"), and includes the following:				maintained by the Chief Election Officer.
(i) The computerized list shall serve as the single system for storing and managing the official list of registered voters throughout the State.	YES			American Samoa meets this requirement.
(ii) The computerized list contains the name and registration information of every legally registered voter in the State.	YES			American Samoa meets this requirement.
(iii) Under the computerized list, a unique identifier is assigned to each legally registered voter in the State.	YES			Each qualified registrant is issued a unique voter registration number (VRN).
(iv) The computerized list shall be coordinated with other agency databases within the State.	YES			The Election Office coordinates the receipt of data with the offices of Motor Vehicles, Vital Statistics, and Social Security.
(v) Any election official in the State, including any local election official, may obtain immediate electronic access to the information contained in the computerized list.	YES			All election officials in the Territory have immediate electronic access to the territory-wide voter list.
(vi) All voter registration information obtained by any local election official in the State shall be electronically entered into the computerized list on an expedited basis at the time the information is provided to the local official.	YES			American Samoa meets this requirement.
(vii) The chief State election official shall provide such support as may be required so that local officials are able to enter	YES			American Samoa meets this requirement.

Section 303 Computerized Territory-wide Voter Registration List & Voters Who Register by Mail	Status			Implementation
	Meets Requirement	Meets Requirement Partially	New Capability to be Implemented	
information as described in clause (vi).				
(viii) The computerized list shall serve as the official voter registration list for the conduct of all elections for Federal office in the State.	YES			American Samoa meets this requirement.
(B) EXCEPTION – The requirement under subparagraph (A) shall not apply to a State in which, under State law in effect continuously on and after the date of the enactment of this Act, there is no voter registration requirement for individuals in the State with respect to elections for Federal office.				Does not apply. American Samoa requires eligible voters to register to vote.
(2) COMPUTERIZED LIST MAINTENANCE-				
(A) IN GENERAL – The appropriate State or local election official shall perform list maintenance with respect to the computerized list on a regular basis as follows:				
(i) If an individual is to be removed from the computerized list, such individual shall be removed in accordance with the provisions of the National Voter Registration Act of 1993 (42 U.S.C. 1973gg et seq.), including subsections (a)(4), (c)(2), (d), and (e) of section 8 of such Act (43 U.S.C. 1973gg-6).	YES			American Samoa meets this requirement. The Chief Election Officer is the only one authorized to remove names from the official list of registered voters.
(ii) For purposes of removing names of ineligible voters from the official list of eligible voters -				
(I) under section 8(a)(3)(B) of such Act (42 U.S.C. 1973gg-6(a)(3)(B)), the State shall coordinate the computerized list with State agency records on felony status; and	YES			The Election Office coordinates directly with the Parole and Probation offices regarding the felony status of registered voters, and with the Governor's office regarding the commutations or pardons granted by the Governor.

Section 303 Computerized Territory-wide Voter Registration List & Voters Who Register by Mail	Status			Implementation
	Meets Requirement	Meets Requirement Partially	New Capability to be Implemented	
(II) by reason of the death of the registrant under section 8(a)(4)(A) of such Act (42 U.S.C. 1973gg-6(a)(4)(A)), the State shall coordinate the computerized list with State agency records on death.	YES			The Election Office coordinates directly with the Office of Vital Statistics regarding those registered voters who have passed away.
(iii) Notwithstanding the preceding provisions of this paragraph, if a State is described in section 4(b) of the National Voter Registration Act of 1993 (42 U.S.C. 1973gg-2(b)), that State shall remove the names of ineligible voters from the computerized list in accordance with State law.	YES			American Samoa complies with all American Samoa laws concerning the removal of names of ineligible voters from the territory-wide voter list.
(B) CONDUCT – The list maintenance performed under subparagraph (A) shall be conducted in a manner that ensures that -				
(i) the name of each registered voter appears in the computerized list;	YES			The names of registered voters described in subparagraph (A) remain, but are coded so as not to appear on the Official Roll of Registered Voters on election day.
(ii) only voters who are not registered or who are not eligible to vote are removed from the computerized list; and	YES			American Samoa complies with this requirement. See (B)(i) above.
(iii) duplicate names are eliminated from the computerized list.	YES			American Samoa meets this requirement.
(3) TECHNOLOGICAL SECURITY OF COMPUTERIZED LIST – The appropriate State or local official shall provide adequate technological security measures to prevent the unauthorized access to the computerized list established under this section.	YES			The territory-wide voter list is accessed only via the LAN system, which has been secured to prevent unauthorized access.

Section 303 Computerized Territory-wide Voter Registration List & Voters Who Register by Mail	Status			Implementation
	Meets Requirement	Meets Requirement Partially	New Capability to be Implemented	
(4) MINIMUM STANDARD FOR ACCURACY OF STATE VOTER REGISTRATION RECORDS – The State election system shall include provisions to ensure that voter registration records in the State are accurate and are updated regularly, including the following:				
(A) A system of file maintenance that makes a reasonable effort to remove registrants who are ineligible to vote from the official list of eligible voters. Under such system, consistent with the National Voter Registration Act of 1993 (42 U.S.C. 1973gg et seq.), registrants who have not responded to a notice and who have not voted in 2 consecutive general elections for Federal office shall be removed from the official list of eligible voters, except that no registrant may be removed solely by reason of a failure to vote.	YES			American Samoa meets this requirement. The Chief Election Officer is statutorily required within 60 days after every general election to remove the name of any voter who fails to vote in the recent general election and the preceding election.
(B) Safeguards to ensure that eligible voters are not removed in error from the official list of eligible voters.	YES			American Samoa meets this requirement. Name, SS#, and date of birth are compared on each voter before removal.
(5) VERIFICATION OF VOTER REGISTRATION INFORMATION -				
(A) REQUIRING PROVISION OF CERTAIN INFORMATION BY APPLICANTS-				
(i) IN GENERAL – Except as provided in clause (ii), notwithstanding any other provision of law, an application for voter registration for an election for Federal office may not be accepted or processed by a State unless the application includes -				
(I) in the case of an applicant who has been issued a current and valid driver's	YES			American Samoa law requires full Social Security number and does not accept the

Section 303 Computerized Territory-wide Voter Registration List & Voters Who Register by Mail	Status			Implementation
	Meets Requirement	Meets Requirement Partially	New Capability to be Implemented	
license, the applicant's driver's license number; or				driver's license as a valid alternative.
(II) in the case of any other applicant (other than an applicant to whom clause (ii) applies), the last 4 digits of the applicant's social security number.	YES			American Samoa meets this requirement. AS requires full Social Security number.
(ii) SPECIAL RULE FOR APPLICANT'S WITHOUT DRIVER'S LICENSE OR SOCIAL SECURITY NUMBER – If an applicant for voter registration for an election for Federal office has not been issued a current and valid driver's license or a social security number, the State shall assign the applicant a number which will serve to identify the applicant for voter registration purposes. To the extent that the State has a computerized list in effect under this subsection and the list assigns unique identifying numbers to registrants, the number assigned under this clause shall be the unique identifying number assigned under the list.	YES			American Samoa law requires full Social Security number. Our voter registration system assigns a voter registration number to each applicant that is unique to each voter.
(iii) DETERMINATION OF VALIDITY OF NUMBERS PROVIDED – The State shall determine whether the information provided by an individual is sufficient to meet the requirements of this subparagraph, in accordance with State law.	YES			American Samoa meets this requirement.
(B) REQUIREMENTS FOR STATE OFFICIALS -				
(i) SHARING INFORMATION IN DATABASES – The chief State election official and the official responsible for the				Not applicable in American Samoa because the entire social security number is required, and thus the Territory falls under (D) Special

Section 303 Computerized Territory-wide Voter Registration List & Voters Who Register by Mail	Status			Implementation
	Meets Requirement	Meets Requirement Partially	New Capability to be Implemented	
State motor vehicle authority of a State shall enter into an agreement to match information in the database of the statewide voter registration system with information in the database of the motor vehicle authority to the extent required to enable each such official to verify the accuracy of the information provided on applications for voter registration.				Rule for Certain States.
(ii) AGREEMENTS WITH COMMISSIONER OF SOCIAL SECURITY – The official responsible for the State motor vehicle authority shall enter into an agreement with the Commissioner of Social Security under section 205(r)(8) of the Social Security Act (as added by subparagraph (C)).				Not applicable in American Samoa because the entire social security number is required, and thus the Territory falls under (D) Special Rule for Certain States.
(C) ACCESS TO FEDERAL INFORMATION-				American Samoa requires the entire social security number.
(D) SPECIAL RULE FOR CERTAIN STATES – In the case of a State which is permitted to use social security numbers, and provides for the use of social security numbers, on applications for voter registration, in accordance with section 7 of the Privacy Act of 1974, the provisions of this paragraph shall be optional.				American Samoa requires the entire social security number.
(b) REQUIREMENTS FOR VOTERS WHO REGISTER BY MAIL-				
(1) IN GENERAL – Notwithstanding section 6(c) of the National Voter Registration Act of 1993 (42 U.S.C. 1973gg-4)(c)) and subject to paragraph (3), a State shall, in a uniform and nondiscriminatory manner, require an individual				

Section 303 Computerized Territory-wide Voter Registration List & Voters Who Register by Mail	Status			Implementation
	Meets Requirement	Meets Requirement Partially	New Capability to be Implemented	
to meet the requirements of paragraph (2) if -				
(A) the individual registered to vote in a jurisdiction by mail; and	YES			American Samoa meets this requirement.
(B)(i) the individual has not previously voted in an election for federal office in the State; or	YES			American Samoa meets this requirement.
(ii) the individual has not previously voted in such an election in the jurisdiction and the jurisdiction is located in a State that does not have a computerized list that complies with the requirements of subsection (a).	YES			American Samoa meets this requirement.
(2) REQUIREMENTS -				
(A) IN GENERAL – An individual meets the requirements of this paragraph if the individual -				
(i) in the case of an individual who votes in person -				
(I) presents to the appropriate State or local election official a current and valid photo identification; or	YES			American Samoa law requires that each voter present identification duly issued by a governmental agency, containing a photographic likeness of the applicant.
(II) presents to the appropriate State or local election official a copy of a current utility bill, bank statement, government check, paycheck, or other government document that shows the name and address of the voter.	YES			American Samoa meets this requirement. American Samoa allows the presentation of one specific government document, the Voter Registration Card (VRC), that shows name and address of the voter.
(ii) in the case of an individual who votes by mail, submits with the ballot -				
(I) a copy of a current and valid photo identification; or	YES			The photo identification that is presented during the registration by mail is maintained in a manual file for each individual voter. The manual file also contains the voter's

Section 303 Computerized Territory-wide Voter Registration List & Voters Who Register by Mail	Status			Implementation
	Meets Requirement	Meets Requirement Partially	New Capability to be Implemented	
				signature. Upon receipt of a mail-in ballot only the signatures are verified.
(II) a copy of a current utility bill, bank statement, government check, paycheck, or other government document that shows the name and address of the voter.	YES			See section (ii)(I) above.
(B) FAIL-SAFE VOTING-				
(i) IN PERSON – An individual who desires to vote in person, but who does not meet the requirements of subparagraph (A)(i), may cast a provisional ballot under section 302(a).	YES			American Samoa meets this requirement. American Samoa provides provisional ballots at every polling station.
(ii) BY MAIL – An individual who desires to vote by mail, but who does not meet the requirements of subparagraph (A)(ii), may cast such a ballot by mail and the ballot shall be counted as a provisional ballot in accordance with section 302(a).	YES			American Samoa meets this requirement.
(3) INAPPLICABILITY – Paragraph (1) shall not apply in the case of a person -				
(A) who registers to vote by mail under section 6 of the National Voter Registration Act of 1993 and submits as part of such registration either	YES			American Samoa meets this requirement.
(i) a copy of a current and valid photo identification; or	YES			American Samoa meets this requirement.
(ii) a copy of a current utility bill, bank statement, government check, pay check, or government documents that shows the name and address of the voter;	YES			American Samoa meets this requirement.
(B)(i) who registers to vote by mail under section 6 of the National Voter Registration Act of 1993 (42 U.S.C. 1973gg-4) and submits as part of such registration either -	YES			American Samoa meets this requirement.

Section 303 Computerized Territory-wide Voter Registration List & Voters Who Register by Mail	Status			Implementation
	Meets Requirement	Meets Requirement Partially	New Capability to be Implemented	
(I) a driver's license number; or	YES			American Samoa meets this requirement.
(II) at least the last 4 digits of the individual's social security number; and	YES			American Samoa meets this requirement.
(ii) with respect to whom a State or local election official matches the information submitted under clause (i) with an existing State identification record bearing the same number, name and date of birth as provided in such registration; or	YES			American Samoa meets this requirement.
(C) who is -				
(i) entitled to vote by absentee ballot under the Uniformed and Overseas Citizens Absentee Voting Act (42 U.S.C. 1973ff-1 et seq.);	YES			American Samoa meets this requirement.
(ii) provided the right to vote otherwise than in person under section 3(b)(2)(B)(ii) of the Voting Accessibility for the Elderly and Handicapped Act (42 U.S.C. 1973ee-1(b)(2)(B)(ii)); or	YES			American Samoa meets this requirement.
(iii) entitled to vote otherwise than in person under any other Federal law.	YES			American Samoa meets this requirement.
(4) CONTENTS OF MAIL-IN REGISTRATION FORM -				
(A) IN GENERAL – The mail voter registration form developed under section 6 of the National Voter Registration Act of 1993 (42 U.S.C. 1973gg-4) shall include the following:				
(i) The question "Are you a citizen of the United States of America?" and boxes for the applicant to check to indicate whether the applicant is or is not a citizen of the United States.	YES			American Samoa utilizes the Federal Post Card Application (FPCA), for purposes of mail-in registration and requests for absentee ballot. This question is contained in the FPCA.

Section 303 Computerized Territory-wide Voter Registration List & Voters Who Register by Mail	Status			Implementation
	Meets Requirement	Meets Requirement Partially	New Capability to be Implemented	
(ii) The questions "Will you be 18 years of age on or before election day?" and boxes for the applicant to check to indicate whether or not the applicant will be 18 years of age or older on election day.	YES			American Samoa utilizes the Federal Post Card Application (FPCA), for purposes of mail-in registration and requests for absentee ballot. This question is contained in the FPCA.
(iii) The statement "If you checked 'no' to the response to either of these questions, do not complete this form".	YES			American Samoa utilizes the Federal Post Card Application (FPCA), for purposes of mail-in registration and requests for absentee ballot. This question is contained in the FPCA.
(iv) A statement informing the individual that if the form is submitted by mail and the individual is registering for the first time, the appropriate information required under this section must be submitted with the mail-in registration form in order to avoid the additional identification requirements upon voting for the first time.	YES			American Samoa utilizes the Federal Post Card Application (FPCA), for purposes of mail-in registration and requests for absentee ballot. This question is contained in the FPCA.
(B) INCOMPLETE FORMS – If an applicant for voter registration fails to answer the question included on the mail voter registration form pursuant to subparagraph (A)(i), the registrar shall notify the applicant of the failure and provide the applicant with an opportunity to complete the form in a timely manner to allow for the completion of the registration form prior to the next election for Federal office (subject to State law).	YES			American Samoa meets this requirement.
(c) PERMITTED USE OF LAST 4 DIGITS OF SOCIAL SECURITY NUMBERS – The last 4 digits of a social security number described in subsections (a)(5)(A)(i)(II) and (b)(3)(B)(i)(II) shall not be considered to be a social security number for				

Section 303 Computerized Territory-wide Voter Registration List & Voters Who Register by Mail	Status			Implementation
	Meets Requirement	Meets Requirement Partially	New Capability to be Implemented	
purposes of section 7 of the Privacy Act of 1974 (5 U.S.C. 522a note).				
(d) EFFECTIVE DATE -				

4. MINIMUM REQUIREMENTS

Section 304. Minimum Requirements: "The requirements established by this title are minimum requirements and nothing in this title shall be construed to prevent a State from establishing election technology and administration requirements that are more strict than the requirements established under this title so long as such State requirements are not inconsistent with the Federal requirements under this title or any law described in section 906."

Implementation: American Samoa understands that the requirements in HAVA Title III are minimum requirements and that American Samoa may establish election technology and administration requirements that are more stringent. Any more stringent requirement that American Samoa imposes will comply with Title III requirements, as well as the laws described in HAVA § 906.

5. METHODS OF IMPLEMENTATION LEFT TO DISCRETION OF STATE

Section 305. Methods of Implementation Left to Discretion of State: "The specific choices on the methods of complying with the requirements of this title shall be left to the discretion of the State."

Implementation: American Samoa chose various means to comply with the requirements of HAVA Title III. Specific details on the implementation methodology chosen can be found in the foregoing subsections 1 through 3 above.

6. OTHER ACTIVITIES TO IMPROVE THE ADMINISTRATION OF ELECTIONS

Section 251(b)(2). Other Activities to Improve the Administration of Elections: "A State may use a requirements payment to carry out other activities to *improve the administration of elections for Federal office* if the State certifies to the Commission that-

(A) the State has implemented the requirements of title III; *or*

(B) the amount expended with respect to such other activities does not exceed an amount equal to the minimum payment amount applicable to the State under section 252(c)."

Implementation: American Samoa certifies that it has implemented the requirements of Title III as set forth above.

American Samoa will carry out the following activities to improve the administration of elections for Federal office:

a. Development of Staff

Because the Election Office staff does not have readily available access to continuing professional education and contact with other election administrators in the U.S., requirements payments are used to support training of American Samoa election staff.

b. Assure Access for Individuals with Disabilities

The Election Office, in conjunction with the Office of Protection and Advocacy for the Disabled (OPAD), University Center for Excellence for the Developmental Disabilities/American Samoa Community College (ASCC) and the American Samoa Developmental Disabilities Council shall continue to meet the objectives of the plan developed pursuant to §261 of HAVA. The plan calls for the following:

* Ensure that all polling places are accessible.

* Provide territory-wide training to voters with full range of disabilities, and utilizing trainers with disabilities, to embrace privacy and independence in the voting process.

* Develop and implement training curricula and educational materials for election officials and polling station officials.

* Provide individuals with the full range of disabilities with information about the accessibility of the polling places.

Requirements payments have been used to provide a project coordinator for program development, implementation, and territory-wide coordination of this project. As detailed in section K of this State Plan, this same individual has other HAVA-related responsibilities.

Requirements payments will also be used for equipment, materials, and supplies to assure accessibility to the polling place for individuals with disabilities.

c. Central Election Office Relocation

In order to improve the administration of elections, American Samoa's Central Election Office must be expanded to make classroom space for voter education and election official training, expand walkways and

hallways, and construct elevators or ramps for easier access by voters with disabilities, provide additional parking for better access by voters, and make such other physical changes necessary to comply with title III requirements of the Act.

American Samoa's current Central Election Office is located in the eastern portion of the main island of Tutuila. It is housed in a 2-story structure (with another local government agency), which is a converted multi-unit residential building that was built in the 1960s. The building is constructed of mostly lumber, and, given American Samoa's tropical weather, may not be able to withstand continued termite infestation or tropical hurricanes. In addition, the building's architectural long and narrow design make it difficult for disabled voters to access. Parking is limited, and the building is so close to the main highway that traffic jams are not uncommon when voter registration deadlines approach. Further, the land is limited at the current location, that expanding the parking lot cannot be done without building an expensive multi-story parking structure.

Given the state of the current Election Office building, it is more cost-effective to relocate American Samoa's Central Election Office to a new location rather than refit its current location. The American Samoa Government has assigned a parcel of land in the central most populated part of American Samoa for this purpose. The new building that is envisioned will have a capacity of approximately 5,000 square feet. It will be constructed to withstand Category 5 hurricanes or cyclones. On-going voter registration and voter education programs will be conducted at this location. There will be a large open area in the building to conduct training for election officials, and to serve as the on-island absentee (early) polling station during elections. The building will be equipped to serve all disabled voters. The assigned parcel of land is along the main highway, but is set back to allow for the development of ample parking and to prevent traffic jams. It will contain a vault-like room to centralize the storage of all manual records and files for the Territory's eligible (and previously-eligible) voters. All equipment necessary to maintain the computerized territory-wide voter registration list will be housed at this new center. In addition, for security purposes, this new election center will be less than half a mile from the proposed site of the Territorial Office of Homeland Security and less than a quarter of a mile from the police substation serving that area of the Territory.

B. DISTRIBUTION OF REQUIREMENTS PAYMENTS & ELIGIBILITY FOR DISTRIBUTION

How American Samoa will distribute and monitor the distribution of the requirements payment to units of local government or other entities in the Territory for carrying out the activities described in "A. Meeting Title III Requirements and Other Activities," including a description of the criteria to be used to determine the eligibility of such units or entities for receiving payment; and the methods to be used by the State or Territory to monitor the performance of the units or entities to whom the payment is distributed, consistent with the performance goals and measures adopted under §254(a)(8).

All elections and related activities in American Samoa are conducted by the Election Office. No units of local government or any other entity are authorized to conduct elections within the Territory. Therefore, the Election Office will be managing and monitoring the performance of activities funded by the requirements payments. The Election Office will also be accountable for all expenditures, funding levels, program controls, and outcomes. All applicable local and procurement laws regarding the use of the requirements payments will be followed.

C. VOTER EDUCATION, ELECTION OFFICIAL AND POLL WORKER TRAINING

How American Samoa will provide for programs for voter education, election official education and training, and poll worker training which will assist the Territory in meeting the requirements of Title III.

The Election Office continues to improve its voter education program. The voter education program consists of information in the form of FACTSHEETS (hard copy and electronically on the website), brochures, and public service announcements (PSA). Besides information about the candidates and the issues, voters also need information on the process of registration and voting. Information given at the polls represents the very last step in an education process that begins with civic education in the schools.

A voter education program has been developed to inform citizens of:

* how to register to vote and confirm their registration status;
* where and when to vote;
* how to cast a valid ballot; and
* their rights as voters.

The Election Office continues to develop a more active outreach program, while still retaining the FACTSHEETS and brochures, accomplished by informational programs on the local television station, participation in high school civic classes, and newspaper publication of upcoming election events and dates. In addition, the Election Office will use civic and advocacy groups, community organizations, candidates, the media, and election officials to educate the voters.

Requirements payments will be used for the purposes of materials development, outreach activities, and the development of Territory-wide curriculum for voter education and poll-workers' and officials' training.

D. VOTING SYSTEM GUIDELINES AND PROCESS

How American Samoa will adopt voting system guidelines and processes, which are consistent with the requirements of § 301.

As outlined in Section A, "Meeting Title III Requirements and Other Activities", American Samoa law specifies the voting system (i.e. paper ballots) and the manner in which the votes must be counted and certified. The Election Office administers this system consistent with the requirements of § 301.

E. AMERICAN SAMOA'S HAVA FUND MANAGEMENT

How will American Samoa establish a fund described in subsection (b) for purposes of administering the Territory's activities under this part, including information on fund management.

At the request of the Election Office, the Department of Treasury has created an account into which Section 101 funds were deposited. The same arrangement has been established for requirements payments that have been received. Unless waived, the 5% match will also be deposited into this latter account. Unspent federal funds in this latter account will be set-aside in the Section 101 fund for payment of long-term costs of complying with HAVA.

The Election Office continues to work with the Office of Planning and Budget, and the Department of Treasury to follow and enforce all mandated fiscal controls and policies.

F. AMERICAN SAMOA'S PROPOSED BUDGET

American Samoa's budget for activities under this part, based on the Territory's best estimates of the costs of such activities and the amount of funds to be made available, including (A) specific information on the costs of the activities required to be carried out to meet the requirements of Title III; (B) the portion of the requirements payment which will be used to carry out activities to meet such requirements; and (C) the portion of the requirements payment which will be used to carry out other activities.

The attached table outlines American Samoa's budget, actual expenditures, and left over balance. (See Attachment A)

G. MAINTENANCE OF EFFORT

How American Samoa, in using the requirements payment, will maintain the expenditures of the Territory for activities funded by the payment at a level that is not less than the level of such expenditures maintained by the State or Territory for the fiscal year ending prior to November 2000.

Consistent with HAVA § 254(a)(7), in using any requirements payment, American Samoa maintains expenditures for activities funded by the payment at a level equal to or greater than the level of such expenditures in FY 2000 – a total of $250,000.

H. HAVA PERFORMANCE GOALS AND MEASURES

How American Samoa will adopt performance goals and measures that will be used by it to determine its success and the success of units of local government in the Territory in carrying out the plan, including timetables for meeting each of the elements of the plan, descriptions of the criteria the Territory will use to measure performance and the process used to develop such criteria, and a description of which official is to be held responsible for ensuring that each performance goal is met.

American Samoa continues to establish performance goals and institute a process to measure progress toward the achievement of these goals. This process will provide the structure and continued measurable targets for accomplishment.

As detailed in this State Plan, the Election Office has established a position and hired an individual to oversee continuous management of the State Plan. This individual is responsible for developing and monitoring a uniform performance evaluation process. In measuring progress, original goals and objectives need to be revisited, and adjustments need to be made where appropriate.

I. STATE/TERRITORY-BASED ADMINISTRATIVE COMPLAINT PROCEDURES

A description of the uniform, nondiscriminatory Territory-based administrative complaint procedures in effect under § 402. Deadline for compliance: Prior to certification of State Plan, but no later than January 1, 2004; no waiver permitted.

American Samoa has developed administrative regulations to establish the required procedure to address complaints revolving around election issues. The nature of the complaints will be restricted to suspected violations of HAVA Title III and therefore pertain to the processes of voter registration, voting and election reporting. These regulations constitute a new chapter that are part of the administrative regulations governing elections, contained in Title 3 of the American Samoa Administrative Code.

These regulations satisfy the requirements of HAVA §402 by providing a uniform and nondiscriminatory complaint procedure. Under these procedures, any person who believes that there has been a violation of HAVA Title III may file a complaint. The complaint must be in writing, sworn and notarized. At the complainant's request, there will be a hearing on the record.

If there is a finding that a violation occurred or is occurring, an appropriate remedy shall be provided. Appropriate remedy will not include financial payments to complainants or civil penalties for election officials, even if it is determined that a violation of Title III has occurred. Remedies may include written findings that a violation of Title III has occurred, strategies for insuring that the violation does not re-occur, and, if it appears that the complaint is systemic, possible actions by the Election Office to eliminate or prevent future incidences.

If there is no violation, the complaint will be dismissed and the results will be published. A final determination on a complaint must be made within 90 days, and if this deadline cannot be met, the complaint will proceed under alternative dispute resolution procedures.

The administrative regulations were adopted pursuant to the Administrative Procedures Act, ASCA §4.1001 et seq.

Requirements funding will be used for the hearings requirement of this section.

J. EFFECT OF TITLE I PAYMENTS

A description of how American Samoa's payment under Title I will affect the activities proposed to be carried out under the plan, including the amount of funds available for such activities.

The Territory of American Samoa received $1,000,000.00 in Title I payments.

1. §101 – Payments for activities to improve administration of elections.

American Samoa received $1,000,000.00 under §101. A substantial portion of these funds have been expended as follows (See also Attachment A):

a. Complying with Title III - The Election Office used funds under this category to hire three individuals, a HAVA coordinator responsible for the development and management of all HAVA programs, a HAVA outreach staff member responsible for the coordination of outreach programs through radio, television, and newspapers, and a computer programmer responsible for the coordination of American Samoa's database program, including but not limited to the continuous implementation of a "single, uniform, official, centralized, interactive computerized territorial-wide voter registration list". Funds were also utilized for consultant fees associated with the initial development, updating and filing of American Samoa's State plans as well as establishing and implementing a provisional voting process. The Election Office also purchased new computer hardware and software as well as other systems components to support its voter registration database.

b. Voter Education - The Election Office utilized funds under this category to conduct voter education regarding voting procedures, voting rights, and all other related HAVA voting subjects. Programs were developed and implemented via several mediums, including but not limited to local television and radio. Election pamphlets and brochures were also developed, printed and distributed throughout the Territory.

c. Training Election Officials & Poll Worker - The Election Office used funds under this category to conduct election officials' training approximately 45 days prior to each election day. Training is then conducted for polling place teams up until the day of election.

d. Election Complaints Hotlines - The Election Office developed election complaints hotlines, expending funds on the cost of the installation and monthly recurring costs for local telephone lines as well as other associated costs.

Table of Expenditures Paid with Section 101 funds

Description	2003-2006 Prelim. Budget	Actual Funding Rcv'd	Actual Expenditures
Election Improvement	$1,000,000	$1,000,000	
- Title III Compliance			$200,000
- Voter Education			125,000
- Training Officials/Poll Watchers			125,000
- Election Hotlines			78,000
TOTAL	**$1,000,000**	**$1,000,000**	**$528,000**

Table of Expenditures by object class (i.e. salaries, equipment, contractual services) Paid with Section 101 Funds

Object Class	Estimated Expenditures
Personnel	$101,000
Supplies	73,000
Contract Services	114,000
Travel	67,000
Equipment	134,000
Other Expenses	39,000
TOTAL EXPENDITURES:	**$528,000**

*As of September 30, 2005, no Section 251 funds have been expended. However, because American Samoa received Section 101 funds first, American Samoa utilized this fund towards the accomplishment of most of the spending categories outlined under Section 251 funds and has reprogrammed Section 251 funds for other activities. (See Attachment A)

2. §102 – Replacement of punch card or lever voting machines.

American Samoa did not apply for, and therefore did not receive, funding under §102.

K. AMERICAN SAMOA'S HAVA STATE PLAN MANAGEMENT

How American Samoa will conduct ongoing management of the plan, except that the State or Territory may not make any material change in the administration of the plan unless the change (A) is developed and published in the Federal Register in accordance with §255 in the same manner as the State Plan;(B) is subject to public notice and comment in accordance with §256 in the same manner as the State Plan; and (C) takes effect only after the expiration of the 30-day period which begins on the date the change is published in the Federal Register.

The success of future elections will depend on sound and responsible management of the State Plan. Due to the complexity of HAVA and the potential variety of projects it encompasses, American Samoa has established a position and hired an individual to oversee all HAVA-related activities. This individual conducts ongoing management of the State Plan, including project planning (for all HAVA-related and other election reform projects) and establishing and implementing program management standards (i.e. performance measures, review and approval processes, issue/risk management, etc.). This same individual is also responsible for other election functions, including: budget and fiscal, personnel, office support functions, and HAVA accounting requirements.

L. CHANGES TO STATE PLAN FROM PREVIOUS FISCAL YEAR

A description of how this State plan reflects changes from American Samoa's preliminary State plan and how American Samoa succeeded in carrying out the state plan for such previous fiscal year.

The major change in this State plan from American Samoa's preliminary State plan is the incorporation in the plan of the relocation of the Central Election Office and the revision of the budget to provide for this relocation. In order to improve the administration of elections, American Samoa's Central Election Office must be expanded to make classroom space for voter education and election official training, expand walkways and hallways, and construct elevators or ramps for easier access by voters with disabilities, provide additional parking for better access by voters, and make such other physical changes necessary to comply with title III requirements.

It should also be noted that American Samoa's preliminary State plan's HAVA Estimated Budget for Fiscal Years 2003 through 2006 estimated the receipt of funds totaling $2,430,000. However, American Samoa received approximately $110,639 less in actual Section 251 funds for a total of $2,319,361. This updated State plan budget has made the necessary reduction in its budget to reflect this decrease in the actual amount of Section 251 funds received.

As described in this Plan, American Samoa has succeeded in implementing title III requirements and continues to implement all the goals set forth in its preliminary State plan.

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BILLING CODE 6820–KF–C

M. STATE PLAN DEVELOPMENT AND COMMITTEE

A description of the committee which participated in the development of the state plan in accordance with §255, and the procedures followed by the committee under §§255 and 256.

American Samoa's State plan development committee consists of individuals who are familiar with the election process in American Samoa. They are:

-Executive Director, American Samoa Developmental Disabilities Council

-Legal Counsel to the Governor

-Deputy Chief Election Officer

-Representative, American Samoa Bar Association

This State plan was drafted under the direction of the Chief Election Officer. The committee reviewed and then distributed the preliminary draft to the public to receive input and feedback. The statements received were taken into consideration in finalizing this Plan.

The committee intends to meet at least twice a year to review any supplements and/or modifications to this State plan that the HAVA coordinator (who is identified in the foregoing section K) develops.

ATTACHMENT A

HAVA PROPOSED BUDGET BY FUND

Description	Prelim Budget '03-'06	Funding Rcv'd '03-'06	Updated Budget '03-'06	Actual Spending '03-'05	Residual Funds FY 2006
Title I Requirements (§ 101)		1,000,000			
Improve the Administration of Elections	1,000,000				
Title III Compliance	0		200,000	200,000	0
Voter Education	0		275,000	125,000	150,000
Training Poll-workers/officials	0		375,000	125,000	250,000
Election Hotlines/transportation	0		150,000	78,000	72,000
Sub-total	**1,000,000**	**1,000,000**	**1,000,000**	**528,000**	**472,000**
Title III Requirements & Other Activities (§251)		**2,319,361**			
Voting System Standards (§301)	350,000		200,000	0	200,000
Provisional Voting (§302)	225,000		200,000	0	200,000
Voter Registration System (§303)	450,000		300,000	0	300,000
Other Election Activities					
Election Office Relocation	0		1,219,361	0	1,219,361
Voter Education	255,000		0	0	0
Election Official & Poll Worker Training	250,000		0	0	0
HAVA Oversight & Reporting	150,000		100,000	0	100,000
Overall Management					
State Plan Committee meetings	30,000		30,000	0	30,000
Hearings on adoption of HAVA Performance Goals & Measures	120,000		20,000	0	20,000
Election Administration – design & production of new forms, translation, etc.	450,000		200,000	0	200,000
Complaint Procedure (Section 402)	150,000		50,000	0	50,000
Sub-total	**2,430,000**	**2,319,361**	**2,319,361**	**0**	**2,319,361**
GRAND TOTAL	**3,430,000**	**3,319,361**	**3,319,361**	**528,000**	**2,791,361**

Federal Register

Thursday,
June 29, 2006

Part IV

Department of Health and Human Services

Administration for Children and Families

45 CFR Parts 261, et al.

Reauthorization of the Temporary Assistance for Needy Families Program; Interim Final Rule

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

45 CFR Parts 261, 262, 263, 265

RIN 0970–AC27

Reauthorization of the Temporary Assistance for Needy Families Program

AGENCY: Administration for Children and Families (ACF), Department of Health and Human Services (HHS).

ACTION: Interim final rule with request for comments.

SUMMARY: This interim final rule implements the statutory changes enacted in the reauthorization of the Temporary Assistance for Needy Families (TANF) program in the Deficit Reduction Act of 2005. This legislation reauthorizes the TANF program through fiscal year (FY) 2010 with a renewed focus on work, program integrity and strengthening families through healthy marriage promotion and responsible fatherhood. The interim final rule addresses the work and program integrity changes of the new law.

DATES: *Effective Date:* June 29, 2006.

Comment Date: Comments due on or before August 28, 2006.

ADDRESSES: You may submit your comments in writing to the Office of Family Assistance (OFA), Administration for Children and Families, 5th Floor East, 370 L'Enfant Promenade, SW., Washington, DC 20447 or hand deliver to OFA/ACF, 5th Floor East, 901 D St., SW., Washington, DC 20447. You may download an electronic version of the interim final rule at *http://www.regulations.gov* and may download a copy and transmit written comments electronically via the Internet at: *http://www.regulations.acf.hhs.gov.*

FOR FURTHER INFORMATION CONTACT: Robert Shelbourne, Director, Division of State TANF Policy, Office of Family Assistance, ACF, at (202) 401–5150.

SUPPLEMENTARY INFORMATION:

I. Comment Procedures

Instructions: All comments received, including any personal information provided, will be posted without change to *http://www.regulations.acf.hhs.gov.* Also, comments will be available for public inspection Monday through Friday 8:30 a.m. to 5 p.m. at 901 D St., SW., 5th Floor, Washington, DC.

We will not consider comments received beyond the 60-day comment period in modifying the interim final rule. To make sure your comments are fully addressed, we suggest the following:

- Be specific;
- Address only issues raised by the rulemaking discretion exercised in the interim final rule, not the changes to the law itself;
- Explain reasons for any objections or recommended changes;
- Propose appropriate alternatives; and
- Reference the specific section of the interim final rule being addressed.

II. Background

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA) (Pub. L. 104–193) created the Temporary Assistance for Needy Families (TANF) block grant that fundamentally transformed welfare from a cash benefits program to a program focused on work and temporary assistance. Under TANF, adults receiving assistance are expected to engage in work activities and develop the capability to support themselves before their time-limited assistance runs out. States are required to assist recipients in making the transition to employment. Also, they are expected to meet work participation rates and other critical program requirements in order to maintain their full Federal funding and avoid penalties.

The PRWORA legislation also dramatically changed intergovernmental relationships, giving States and Tribes broad flexibility to set eligibility rules and decide what types of benefits and services to provide clients. States and Tribes have used this flexibility to try new, far-reaching initiatives that effectively addressed the needs of families. PRWORA limited Federal regulatory authority, but added new responsibility for tracking State performance and imposing penalties when States fail to comply with program requirements.

TANF has been a truly remarkable example of a successful Federal-State partnership. Millions of parents have left welfare for work, reducing the TANF rolls by nearly 60 percent, from about 4.4 million families in August 1996 to just 1.9 million families in September 2005. But the decline in the caseload is just part of the story. During this period there were also great improvements in a range of outcomes for low-income families and children:

- The percentage of never-married mothers who work outside the home for wages increased nearly 30 percent, from 49.3 percent in 1996 to 63.1 percent in 2004.
- The child poverty rate fell from 20.5 percent in 1996 to 17.8 percent in 2004, reflecting 1.4 million fewer children living in poverty.
- During this same period, the poverty rate among African American children declined from 39.9 percent to 33.2 percent, and the poverty rate among Hispanic children declined from 40.3 percent to 28.9 percent.
- Although the poverty rate has increased some since 2000 as a result of the most recent recession, the surge in job creation over the past two years portends favorably for renewed improvement in poverty rates.

But, if we are to succeed in achieving the full purposes of TANF, there is still much to be done. Even with the dramatic results States have achieved, there are still far too many clients that are denied the opportunities of work and preparation for work. In FY 2005, only 30 percent of those required to work were participating in work activities for sufficient hours to count toward the work participation rate. States have been less effective in placing clients with multiple barriers in work, including those with mental health issues, addiction, developmental or learning disabilities, limited English proficiency, and those subject to domestic violence. While the average wages of clients entering the workforce are above the minimum wage, they are still too low to ensure family well-being. More effective models of post-employment supports that lead to career development and wage progression are needed. Our clients also need programs that sustain and keep families together and programs that enable low-income, non-custodial fathers to help their families financially.

Justification for Interim Final Rule

The Administrative Procedure Act requirements for notice of proposed rulemaking do not apply to rules when the agency finds that notice is impracticable, unnecessary, or contrary to the public interest. We find proposed rulemaking impracticable and contrary to the public interest because it would fragment the implementation of the Deficit Reduction Act's (DRA) (Pub.L. 109–171) work requirements. The DRA clearly states that implementation of certain work requirement changes will be effective October 1, 2006. In particular, the statute strengthens the existing work requirements by extending work participation requirements to families with an adult receiving assistance in a separate State program and recalibrating the caseload reduction credit by updating the base year from FY 1995 to FY 2005. The law

also directs the Secretary of Health and Human Services to define work activities and determine who is a work-eligible individual, and these provisions are critical to the timely implementation of work requirements. In particular, without Federal definitions for work activities, States could define some activities so broadly that they render the new work provisions meaningless, thereby delaying implementation of meaningful reform. Moreover, such a practice would perpetuate existing disparities in State definitions and undermine the equitable treatment of States. In addition, States would be required to establish work participation verification procedures regarding activities that would not yet be defined in regulation. Therefore, States might have to revise their procedures substantially once final regulations were published. Thus, issuing regulations regarding all aspects of work requirements simultaneously is necessary to implement the intent of the law and promote the public interest. Under an interim final rule, States would know how to plan their programs and take necessary steps to implement the new requirements.

Further, in the Deficit Reduction Act of 2005, Congress explicitly allows HHS to issue these regulations on an interim final basis. Thus, the policies reflected in this interim final rule are effective immediately. We will consider all germane comments received during the comment period. With one exception, States must comply with these requirements by October 1, 2006, or be subject to potential penalties during FY 2007. The exception relates to the new penalty created by the Deficit Reduction Act of 2005 for States that fail to establish and maintain procedures to verify reported work participation data. While States are required by the statute and this rule at § 261.63 to submit a Work Verification Plan by September 30, 2006, we will hold States accountable for failure to maintain adequate internal controls and work verification procedures only for conduct that occurs after October 1, 2007.

III. The Deficit Reduction Act of 2005

On February 8, 2006, the President signed the Deficit Reduction Act of 2005 (Pub. L. 109–171). It includes provisions to reauthorize TANF and build on this program's success. The new law addresses the needs of families by maintaining the program's overall funding and basic structure, while focusing increased efforts on building stronger families through work, job advancement, and research on healthy marriage and responsible fatherhood programs. It retains funding at $16.5 billion each year for block grants to States and Tribes; $319 million a year through FY 2008 for supplemental grants to certain States with high population growth and historically low welfare payments; and $2 billion over five years for the Contingency Fund for needy States. It also creates a $150 million a year research, demonstration, and technical assistance fund for competitive grants to strengthen family formation, promote healthy marriages, and support responsible fatherhood.

The Deficit Reduction Act of 2005 maintains State flexibility and many provisions of PRWORA, but includes important changes to improve the effectiveness of the program. The law strengthens work participation requirements by recalibrating the caseload reduction credit so that States only receive credit for additional caseload reductions after FY 2005. Families in separate State programs for whom funds are claimed to meet the ''maintenance of effort'' (MOE) requirements are now included in the work participation rate calculation and other data collection requirements. The law also requires the Secretary to provide additional direction and oversight on how to count and verify allowable work activities, to clarify who is a work-eligible individual and to ensure that State internal control procedures will result in accurate and consistent work participation information. The Deficit Reduction Act of 2005 also creates a new penalty for States that fail to establish and maintain procedures to verify reported work participation data. This interim final rule implements these statutory changes and the next phase of welfare reform by helping more low-income families enter the workforce and succeed at work.

Under PRWORA, we interpreted the limitation on Federal authority to allow us to regulate in two situations: (1) Where Congress explicitly directed the Secretary to regulate; and (2) where Congress charged HHS with enforcing penalties. In the latter situation, we promulgated regulations to set out the criteria we would use in carrying out our authority to assess penalties. The Deficit Reduction Act of 2005 does not alter the general restriction on Federal regulatory authority at Section 417 of the Social Security Act, and so we are continuing this overall policy. However, the law did explicitly direct HHS to regulate on certain aspects of the work participation requirements.

The TANF final rule (64 FR 17720, April 12, 1999) reflects PRWORA's strong focus on moving recipients to work and self-sufficiency, and on ensuring that welfare is a short-term, transitional experience, not a way of life. The rule encourages and supports State flexibility, innovation, and creativity while holding States accountable for moving families toward self-sufficiency. In developing this interim final rule, we have sought to implement the new requirements of the Deficit Reduction Act of 2005 in a way that does not impinge on a State's ability to design effective and responsive programs. Indeed, most States have demonstrated a tremendous commitment to the TANF work goals and objectives, using creativity and ingenuity to help families succeed.

Nevertheless, some observers, and the Government Accountability Office (GAO) in particular, have noted that the flexibility provided to States to define work activities for themselves has led to inconsistent definitions across States as well as inconsistent measurement of work participation. In their 2005 report ''Welfare Reform: HHS Should Exercise Oversight to Help Ensure TANF Work Participation Is Measured Consistently Across States'' (GAO–05–821), GAO noted that the wide range of work activity definitions used across States makes it difficult to compare work participation across States. Similarly, some States have used this flexibility to authorize a wide variety of activities to advantage themselves compared to other States. In particular, some activities included by some States under some work activities do not appear to effectively address barriers to work or enhance the job readiness of clients.

As a result of concerns about the inconsistency of work measures among States, the Deficit Reduction Act of 2005 requires us to issue this regulation to define each work activity category. As we discuss in detail later, under our definitions States retain the flexibility to engage clients in appropriate activities, tailored to their needs. But we restrict certain practices that some States have used under our prior rules, particularly those activities that do not improve job skills or enhance an individual's employability.

We also provide guidance to States on our expectations for verifying and documenting actual hours of participation. We do this through preamble language with examples, as well as through general regulatory language that outlines internal control principles that derive from government auditing standards. The basic premise of this approach is that public officials are accountable for establishing and maintaining effective internal control systems to ensure that laws and regulations are followed; that program

goals and objectives are met; that resources are safeguarded; and that reliable data are obtained, maintained, and fairly disclosed. Under this principle, when a State reports hours of participation for a family, it is reasonable to expect that there is supporting documentation that the reported activities are real and were actually performed for the hours claimed. We also recognize the need to be careful in establishing documentation requirements so that we do not return to an eligibility-focused culture, where paperwork receives more attention than moving individuals into self-sufficiency.

Unsubsidized employment is the primary goal of TANF. A growing body of evidence suggests that more TANF recipients may be working than many believe, and that State-reported TANF data on reasons for case closure may be persistently understating the role of employment. More specifically, States report that less than 20 percent of case closures are due to employment, while nearly half of all cases are closed due to reasons such as ''failure to cooperate,'' ''voluntary closure,'' or ''other'' unspecified reasons. In contrast, an HHS-funded synthesis report of welfare leaver studies conducted by the Urban Institute found that somewhat over half of families leaving welfare do so as a result of employment (*Final Synthesis Report of Findings from ASPE ''Leavers'' Grants,* November, 2001). Many closures that are, in fact, due to employment are coded by the States as ''failure to cooperate'' or as some other category because at the point of closure, the State agency often is unaware that the client became employed. This undercount in administrative data may occur because some recipients obtain employment, but do not immediately notify the TANF agency. As a result, individuals miss out on other employment-supporting benefits for which they may be eligible and States miss families that they could count toward the participation rates.

Part of the success of State efforts is that many recipients want to work and get jobs on their own. The new requirements set forth in the Deficit Reduction Act of 2005 will ensure that TANF agencies know whether their clients are employed so that they can properly address the needs of families moving to self-sufficiency and count them in the work participation rates. The new requirements will also help ensure that TANF agencies know whether families that left welfare were employed prior to case closure so that these families can be counted toward the work participation rate.

New hires information contained in the National Directory of New Hires (NDNH) may help solve these problems. The NDNH information can help identify those who are employed but whose employment is unknown to the TANF agency. We will continue to work with State agencies to provide the NDNH information and to identify effective verification and documentation practices. If State TANF agencies use the NDNH regularly and base their participation rate data on verified employment matches, they will improve the accuracy and consistency of information on which work participation rates are calculated.

In keeping with the President's New Freedom Initiative, we encourage States to make every effort to engage individuals with disabilities in work activities. Disabled individuals on TANF caseloads are capable of participating in productive work activities and deserve an opportunity to become self-sufficient through work. Under the TANF statute, such families are included in the work participation rate calculation. It is important that every effort is made to serve the full range of TANF recipients that can work and benefit from work activities and supports. States are encouraged to explore the capabilities of all TANF recipients to learn what they can do rather than focusing on their limitations. States may explore new ways to implement work activities like specialized work experience sites that help families attain the necessary work skills to improve their ability to obtain employment. In fact, in the definition of ''work-eligible individual'' in § 261.2, we encourage States to work with parents who receive Supplemental Security Income (SSI) and whose children are TANF recipients by giving them the option to include such families when they meet participation requirements. We are hopeful this increased State flexibility will give States the incentive to broaden their efforts in working with disabled individuals to give them every opportunity to enter the workforce.

Of course, States must continue to comply with the civil rights laws, including those enumerated at 408(d) of the Social Security Act, when implementing the new work requirements. Section 408(d) expressly states that any program or activity receiving Federal TANF funds is subject to: (1) The Age Discrimination Act of 1975; (2) Section 504 of the Rehabilitation Act of 1973 (Section 504); (3) the Americans with Disabilities Act of 1990 (ADA); and (4) Title VI of the Civil Rights Act of 1964. These laws are also referenced in the regulations at 45 CFR 260.35. For information about the application of civil rights laws in the context of TANF, visit the Office for Civil Rights (OCR) Web site at *http://www.hhs.gov/ocr.* Among other things, the Web site contains OCR guidance entitled *Civil Rights Laws and Welfare Reform—An Overview and Technical Assistance for Caseworkers on Civil Rights Law and Welfare Reform* and *Prohibition Against Discrimination on the Basis of Disability in the Administration of TANF* and other information on how to contact OCR headquarters and regional offices for further information and technical assistance. Additional information, including fact sheets and discrimination complaint forms, is also located on the OCR Web site or may be obtained by calling OCR toll free at 800–368–1019, TDD 800–537–7697.

IV. Regulatory Provisions

The Deficit Reduction Act of 2005 requires relatively modest changes to existing TANF regulations at 45 CFR Parts 261, 262, 263 and 265. Thus, this interim final rule reflects primarily the changes to the original TANF rules required by the new statutory provisions. In the preamble, we discuss only the regulatory sections that are being revised or newly established. We do not make any changes to either 45 CFR part 260, General TANF Provisions or to 45 CFR part 264, Other Accountability Provisions.

Note that we use the term ''we'' throughout the regulatory text and preamble. The term ''we'' means the Secretary of the Department of Health and Human Services or any of the following individuals or agencies acting on his behalf: the Assistant Secretary for Children and Families, the Regional Administrators for Children and Families, the Department of Health and Human Services, and the Administration for Children and Families. Likewise, the term ''Act'' refers to the Social Security Act, as amended. We use the term ''The Deficit Reduction Act of 2005'' (Pub. L. 109–171) when we refer to the new law. States, the Territories, and the District of Columbia are all subject to the TANF requirements, but for the ease of the reader, hereinafter, a reference to States means this entire group. Tribal TANF programs are not affected by this rule; the Deficit Reduction Act of 2005 does not amend section 412 of the Social Security Act that authorizes Tribal TANF programs.

For the convenience of readers, where we make major changes to a regulatory section or to a subpart, we republish the

section or subpart in its entirety, rather than just the changes. This makes the provisions easier to understand and gives context to the regulatory changes.

Part 261—Ensuring That Recipients Work

Section 261.2 What definitions apply to this part?

Under the original TANF rule, we chose not to define work activities to provide maximum flexibility to States so they could design and carry out the welfare reform programs that best met the individual needs to help families find work and become self-sufficient. We simply listed the 12 work activities in 45 CFR 261.30 in the order they appear in the Act. However, we indicated in the preamble of the final TANF rule, that we were ''concerned that different TANF definitions [of work activities] could affect the vulnerability of States to penalties for failure to meet the participation rate.'' As we noted, ''to the extent possible, we want to ensure an equitable and level playing field for the States.'' We also explained that we would ''carefully assess the types of programs and activities States develop'' and ''if necessary at some time in the future, we will initiate further regulatory action.''

We are now convinced that the flexibility we initially allowed States to define work activities results in inconsistent work participation measurement and that disparities in State definitions undermine the principle of equitable treatment. For example, several States count job search, job readiness activities, and vocational educational training as part of a work experience or community service program. In some instances, it appears that States integrated these activities into work experience or community service to avoid various limitations on some TANF work activities, such as the statutory six-week limitation on counting job search and job readiness assistance. Some States also count participation in otherwise unallowable educational activities as part of an allowable TANF work activity. Thus, defining work activities is necessary to maintain the integrity of the TANF work participation requirements. Unless we define the work activities, States with narrow definitions would be at a disadvantage in meeting the participation requirements compared to States with broader definitions.

Furthermore, the Deficit Reduction Act of 2005 requires the Secretary to promulgate regulations to ensure consistent measurement of work participation rates. The law specifically requires us to determine whether an activity of a recipient of assistance may be treated as a work activity. We are defining each of the allowable work activities to promote consistency in the measurement of work participation rates and thus treat States fairly.

Section 407(d) of the Social Security Act specifies 12 separate and distinct activities. Thus, we have attempted to draft definitions that are, as far as possible, mutually exclusive from one another. Because the list of countable activities is provided by statute, we do not have the regulatory authority to add additional activities. Our definitions follow the order that the work activities are listed in § 261.30 of this part and section 407(d) of the Social Security Act for ease of reference when referring to the nine core work activities that count for the first 20 hours of required work and the three activities that can only count as participation after the 20-hour requirement is met.

We would like to emphasize that these definitions delineate what constitutes each activity for the work participation rate but they in no way change the requirement that individuals must participate for a specified number of hours to count in the participation rate. Generally, that requirement is for an individual to participate for an average of 30 hours per week in the month with the exception that a single custodial parent of a child under six must participate for an average of only 20 hours per week in a month. To count in the two-parent rate, the parents must participate for a combined total of at least 35 or 55 hours, depending on whether they receive federally funded child care. States continue to have the flexibility to assign an individual to a combination of activities, for example blending school and work or training and work or job search and community service, to reach the hours needed to count a family in the work participation rate. Please refer to the regulations in subpart C of part 261 and the preamble explanation of that subpart for more a more detailed discussion of the hours and activities requirements.

Below, we discuss the rationale for the definitions that are included in § 261.2.

Unsubsidized employment means full- or part-time employment in the public or private sector that is not subsidized by TANF or any other public program.

The determination of whether or not employment is subsidized depends on whether the employer, rather than the recipient, receives a subsidy. If an employer receives a direct subsidy for hiring a recipient from TANF or other public funds, that recipient would be considered to be in subsidized public or private sector employment. This definition does not apply to recipients whose employers claim a tax credit for hiring economically disadvantaged workers. While such tax credits are designed to foster the employment of low-income workers, traditionally they have not been treated as ''subsidized employment'' in the context of welfare.

All TANF recipients in unsubsidized employment are, by definition, receiving a subsidy—their TANF assistance grant. The receipt of this grant, however, does not constitute subsidized employment, as long as the employer receives no direct subsidy for employing the recipient. Recipients in unsubsidized employment also may receive work-related subsidies, such as child care, transportation, and other support services.

Self-employment may count as unsubsidized employment. Self-employment may include, but is not limited to, domestic work and the provision of child care. As we explain in the preamble to § 261.60, a State may not count more hours toward the participation rate for a self-employed individual than the number derived by dividing the individual's self-employment income (gross income less business expenses) by the Federal minimum wage.

We are defining both *subsidized private sector employment* and *subsidized public sector employment* as employment for which the employer receives a subsidy from TANF or other public funds to offset some or all of the wages and costs of employing a recipient. Subsidized employment differs from unsubsidized employment in that the employer receives a subsidy. It differs from work experience in that the participant is paid wages and receives the same benefits as a non-subsidized employee who performs similar work.

There are several ways to operate a subsidized employment program. One approach is to use TANF funds that would otherwise be paid as assistance to reimburse some or all of an employer's costs for the wages, benefits, and/or the additional costs of employment-related taxes and insurance. (Under the Aid to Families with Dependent Children (AFDC) program, this approach was called ''work supplementation'' or ''grant diversion.'')

A second model is one in which a third party acts as the employer of record during the trial period, like a temporary staffing agency. For example, a private, for-profit organization may

contract with a welfare agency and serve as the employer of record while the participant works for a private-sector company for a trial period. The organization receives a fee from the TANF or other public agency (and employers) to cover the participant's salary and support services, including on-site follow-up for both employers and employees. The total amount of the payment to the private, for-profit organization depends on how successful it is in placing and keeping employees in jobs.

Supported work for individuals with disabilities, as defined under the Rehabilitation Act of 1973 (29 U.S.C. 705(35)), also could be counted as subsidized employment. Supported work for individuals with disabilities means work in an integrated setting (*i.e.*, where people with and without disabilities work in the same place) for wages consistent with those paid to non-disabled workers with similar job functions. The workers with disabilities may receive individualized services such as, but not limited to, transportation, family support, or additional supervision. To the extent that supported work also includes intensive on-site training activities, it may be counted as on-the-job training, discussed below.

Regardless of the approach, the employer is subject to the requirements of the Fair Labor Standards Act (FLSA) and, as a result, must pay the participant wages that equal or exceed the applicable Federal or State minimum wage. We recommend that States generally limit the duration of subsidized employment programs to six to twelve months; however, longer durations may be appropriate for supported employment of individuals with disabilities, as long as they are justified by an individualized needs assessment.

During this trial period in which the costs of employment are being subsidized, the employer should provide necessary training, guidance, and direction to an employee. At the end of the subsidy period, the employer is expected to retain the participant as a regular employee without receiving a subsidy. States should not allow employers to recycle TANF recipients in subsidized employment slots, thereby reducing their competitive labor costs.

We considered whether to regulate the rate of reimbursement to employers and the duration of a subsidized employment position. We decided against specifying limits because States should have the flexibility to design a program that meets their needs and the needs of the individuals they serve. However, the goal of subsidized employment should be to prepare participants for and move them into unsubsidized employment.

Receipt of employment subsidies provided through the tax code, including Federal tax credits, such as the Work Opportunity Tax Credit (WOTC) and the Welfare-to-Work Tax Credit (WWTC), does not make subsidized employment of an otherwise unsubsidized job for purposes of this definition. These tax credits subsidize employers who hire welfare recipients or other hard-to-employ groups. TANF agencies, however, may not know whether employers use such tax credits and employers may not file for them until well after they have hired recipients. We consider participants supported by Federal tax credits only to be in ''unsubsidized employment.''

Subsidized private or public sector employment also does not include ''on-the-job training'' programs, where employers are subsidized to offset the costs of training. (See the discussion of on-the-job training below.)

Work experience (including work associated with the refurbishing of publicly assisted housing) if sufficient private sector employment is not available means a work activity, performed in return for welfare, that provides an individual with an opportunity to acquire the general skills, training, knowledge, and work habits necessary to obtain employment. The purpose of work experience is to improve the employability of those who cannot find unsubsidized employment. This activity must be supervised by an employer, work site sponsor, or other responsible party daily. Work experience programs are sometimes called ''workfare'' because participants continue to receive their TANF grant.

Some existing State work experience programs include activities that fall outside this definition. For example, several States count job search, job readiness activities, and vocational educational training as part of a work experience program. In some instances, it appears that States integrated these activities into work experience to avoid various limitations, such as the six-week limitation on counting job search and job readiness assistance. We will not permit these practices under this interim final rule.

Work experience participants continue to receive their TANF grant while they are taking part in work and training activities similar to those of paid employees. They do not receive wages or compensation. Nonetheless, they may be considered employees for the purpose of the Fair Labor Standards Act (FLSA). According to the Department of Labor's May 1997 guidance, ''How Workplace Laws Apply to Welfare Recipients,'' ''[w]elfare recipients in 'workfare' arrangements, which required recipients to work in return for their welfare benefits, must be compensated at the minimum wage if they are classified as 'employees' under the Fair Labor Standard Act's (FLSA) broad definition.'' The FLSA applies if there is an employment relationship between an employer and an employee. But the FLSA uses a broader definition than is often used for tax or unemployment purposes. To ''employ'' under the FLSA, means to ''suffer or permit to work.'' If recipients engaged in work experience activities are ''employees'' under the FLSA definition, they must be compensated at the applicable minimum wage. The FLSA's overtime pay (for over 40 hours in a work week), child labor, and recordkeeping requirements also apply.

The TANF assistance and benefits that these work experience participants receive are not considered wages for Social Security purposes, nor are they considered taxable income for purposes of the Federal income tax or the Earned Income Tax Credit. However, a State might consider a participant in work experience to be an employee of the State for purposes of workers' compensation coverage.

We considered whether to regulate the duration of a traditional work experience position. We decided against specifying limits. States should have the flexibility to design programs that meet both their needs and those of the individuals they serve. However, the goal of work experience should be to prepare participants for and move them into unsubsidized employment or other program activities that can help in this transition.

On-the-job training (OJT) means training in the public or private sector that is given to a paid employee while he or she is engaged in productive work and that provides knowledge and skills essential to the full and adequate performance of the job. On-the-job training must be supervised by an employer, work site sponsor, or other responsible party daily.

In this type of activity, States may subsidize the employer to offset the cost of the training provided to the participant. Upon satisfactory completion of the training, we expect the employer to retain the participant as a regular employee without receiving a subsidy.

As noted under the discussion of subsidized employment, ''supported employment'' as defined under the

Rehabilitation Act of 1973 (29 U.S.C. 705(35)), may be counted as OJT if it includes significant on-site training in the knowledge and skills essential to the full and adequate performance of the job. For example, a State Vocational Rehabilitation agency may provide a client with an onsite ''job coach'' who teaches job skills in the context of productive work. If ''supported employment'' includes an employer subsidy and other supportive services but does not include on-site training, it should be counted as subsidized employment.

We defined OJT as a component of employment, whether unsubsidized or subsidized. However, some elements of training may involve specialized preparation to prepare participants for a specific position with an employer and do not constitute employment. Such training may be more akin to vocational educational training. While we have tried to define work activities so that they do not overlap, OJT combines some elements of subsidized employment, vocational education and other forms of training. We are interested in receiving comments about whether we should broaden the definition beyond paid employment to include other aspects of training.

Job search and job readiness assistance means the act of seeking or obtaining employment, preparation to seek or obtain employment, including life skills training, and substance abuse treatment, mental health treatment, or rehabilitation activities for those who are otherwise employable. Job search and job readiness assistance participants should be supervised on an ongoing basis no less frequently than daily. Readers should refer to § 261.34 (which is not revised in this interim final rule) for a discussion of the time limitations that apply to this activity.

''Job search and job readiness assistance'' is a single component for Federal participation standards. The ''job search'' aspect of this component is largely self-explanatory and we define it as ''the act of seeking or obtaining employment,'' which should encompass all reasonable job search initiatives. As such, ''job search'' includes making contact with potential employers, whether by telephone, in person or via the Internet, to learn of suitable job openings, applying for vacancies, and interviewing for jobs.

Our definition of ''job readiness assistance'' comprises two types of activities. The first is preparation necessary for an individual to seek or obtain employment. This includes activities such as preparing a resume or job application, training in interviewing skills, instruction in work place expectations (including instruction on appropriate attire and behavior on the job), and training in effective job seeking, as well as life skills training. The second is substance abuse treatment, mental health treatment, or rehabilitation activities for those who are otherwise employable. Such treatment or therapy must be determined to be necessary and certified by a qualified medical or mental health professional. Some individuals in the TANF caseload are capable of getting and keeping a job but for a substance abuse, mental heath, or other condition that treatment or rehabilitation activities would resolve. We have included these services as part of our definition to help such individuals make the transition from welfare to work.

As with other work activities, a State may only count an individual's actual hours of participation in substance abuse treatment, mental health treatment, or rehabilitation activities and must document those hours as required at §§ 261.60 and 261.61. If an individual does not have sufficient hours in substance abuse treatment, mental health treatment, or rehabilitation activities alone to count in the participation rate, he or she may still be counted in the calculation of the State's work participation rate by combining them with other allowable activities. Individuals in substance abuse treatment, mental health treatment, or rehabilitation activities are subject to the same hours requirements to count for participation that individuals in any other activities must meet. Please refer to §§ 261.31 and 261.32 for more details about the number of hours needed to count a family in the participation rates.

Our goal in incorporating substance abuse treatment, mental health treatment, and rehabilitative activities for those who are otherwise employable into this interim final rule is to ensure that States can meet the needs of all individuals in their caseloads struggling to escape welfare dependency. We are interested in receiving comments about our approach in this area.

For substance abuse treatment, mental health treatment or rehabilitation activities that are not part of job search and job readiness assistance, States should be advised that a portion of those activities may count toward the work participation rate. If a portion of substance abuse treatment, mental health treatment or rehabilitation service meets a common-sense definition of work, then the hours associated with that work activity may count under the appropriate work category, such as work experience. For example, a State may place an individual who is otherwise able to work but for the need to reinforce substance abuse treatment into a special program in which a single provider coordinates work and treatment in a halfway house environment. As part of that treatment program, the individual also fulfills assigned supervised, documented work responsibilities for the benefit of all the residents, such as preparing meals, housecleaning, or scheduling group activities. In that case, the State may report the hours the individual was in the work portion of the program, i.e., performing work that meets the requirements of these rules. The time the individual spent in the treatment component does not count in the work category.

Some States currently incorporate as part of job search and job readiness assistance programs that would fall outside our new definition. For example, at least one State incorporates activities ''that are essential to the health, safety and welfare of families,'' including activities associated with a child's dental checkups, immunization, and school attendance. Parenting skills training or participating in Head Start is part of the definition in more than one State. Another State includes personal care during recovery from a medical problem, bed rest, hospitalization, and activities that promote a healthier lifestyle, such as smoking cessation. These are valuable and important things for a family to address or may be medically appropriate, but they do not constitute work or direct preparation for work. Thus, these activities may not count as job search and job readiness assistance. Only programs that involve seeking and preparing for work can meet this definition.

Current State definitions of job search and job readiness also include one or more of the other eleven countable work activities. For example, one State lists remedial education and English as a Second Language (ESL) as part of job search and job readiness. These activities more closely fit our definition of job skills training directly related to employment or education directly related to employment and should be counted under those activities, as appropriate.

Some States have asked us what constitutes a week for the limitations on counting no more than six weeks per fiscal year of job search and job readiness assistance, no more than four of which may be consecutive. We believe that the most commonly understood and simplest way to answer this question is to use the ordinary

definition of a week: seven consecutive days. Whether the State starts counting an individual's participation on a Monday, a Wednesday or any other day, a week ends seven days later, regardless of how many hours the individual participated in the course of those seven days. If an individual participates for more than four consecutive weeks or a total of six weeks in a fiscal year, the State may not count those hours toward the participation rate.

Community service programs mean structured programs in which TANF recipients perform work for the direct benefit of the community under the auspices of public or nonprofit organizations. We limit community service programs to projects that serve a useful community purpose. This includes programs in fields such as health, social service, environmental protection, education, urban and rural redevelopment, welfare, recreation, public facilities, public safety, and child care. Community service programs must be designed to improve the employability of recipients not otherwise able to obtain employment and must be supervised on an ongoing basis no less frequently than daily. A State agency shall take into account, to the extent possible, the prior training, experience, and skills of a recipient in making appropriate community service assignments.

This definition limits the activity to what many commonly think of as ''community service.'' It excludes, for example, activities such as participation in a substance abuse treatment program, mental health and family violence counseling, life skills classes, parenting classes, job readiness instruction, and caring for a disabled household member, which while important and beneficial, are not primarily directed to benefiting the greater community. As we stated in the preamble to the original final TANF rule (64 FR 17778, April 12, 1999), ''The fact that something has value or is integral to a countable activity does not necessarily mean it can count as participation.'' We reaffirm that perspective under this interim final rule.

Community service programs must include structured activities that both provide a community service and also improve the employability of participants. Some existing State community service programs allow and count unstructured activities that are undertaken with little or no supervision. One State, for example, considers shoveling a neighbor's sidewalk or helping a friend with errands to be community service. Another State counts serving as a foster parent as a community service. Although these activities benefit the community, they do not necessarily involve real supervision or help an individual move toward self-sufficiency. Unlike other work activities, Congress added the term ''programs'' after community service, suggesting that allowable activities should involve structure and supervision. Thus, shoveling sidewalks would meet this criterion only if done as part of a neighborhood maintenance program undertaken by a public or nonprofit agency. In such an environment, this activity would not only address unmet community needs, but also would help participants develop basic works skills, improve work habits, and help move participants toward employment.

In addition, community service programs do not include activities that meet the definition of another allowable TANF work activity. Several States, for example, count job search and job readiness activities, and vocational educational training as part of a community service program. Doing so effectively avoids statutory limitations on these allowable TANF work activities, such as the six-week limitation on counting ''job search and job readiness'' activities, the 12-month limitation on vocational educational training, and the 30-percent limit on counting individuals in vocational educational training. Some States also count participation in otherwise unallowable educational activities as community service. Under our definition, States may not define countable community service programs so broadly as to circumvent statutorily-imposed restrictions on other TANF activities.

We recognize that there may be instances in which other activities are embedded within the community service activity. For example, an individual providing clerical support might attend computer training classes as part of the community service if the assigned activity requires it. Short-term training or similar activities may be counted as community service as long as such activities are of limited duration and are a necessary or regular part of the community service. Activities that are not an integral part of community service cannot count. For example, substance abuse treatment may be a prerequisite for participation in work activities, but it does not count under community service because it is not an integral part of the community service activity.

Examples of programs and activities that fit under our definition of community service include, but are not limited to, work performed for a school (e.g., serving as a teacher's aide), Head Start program (e.g., helping as a parent volunteer), church (e.g., preparing meals for the needy), or government/nonprofit agency (e.g., providing clerical support), as well as participation in volunteer organizations such as Americorps, Volunteers in Service to America (VISTA), or private volunteer organizations.

Vocational educational training (not to exceed 12 months with respect to any individual) means organized educational programs that are directly related to the preparation of individuals for employment in current or emerging occupations requiring training other than a baccalaureate or advanced degree. Vocational educational training participants should be supervised no less frequently than daily.

Vocational educational training programs should be limited to activities that give individuals the knowledge and skills to perform a specific occupation. Under AFDC and the Job Opportunities and Basic Skills (JOBS) Training programs, basic and remedial education, education in English proficiency, and postsecondary education were statutorily authorized activities. However, PRWORA did not include these activities as separate work activities. Although they may help prepare individuals for employment, they are generally not considered vocational education or training and Congress purposely concentrated the TANF work activities on those focused on employment.

Some existing State vocational educational training programs allow other educational activities such as basic skills, language training, and postsecondary education leading to a baccalaureate or advanced degree. We are explicitly restricting these practices to prevent the use of the term ''vocational educational training'' from covering virtually any educational activity. In particular, the TANF program was not intended to be a college scholarship program for postsecondary education. Programs authorized by the Higher Education Act of 1965 (and subsequent amendments) support these longer-term educational activities. In contrast, activities such as basic education and language training qualify as education directly related to employment.

Some States count education leading to a high school diploma as vocational educational training. Although vocational education is often provided in high school, minor parents attending high school, even if in a vocational education track, should be counted as

participating in ''satisfactory attendance at secondary school or in a course of study leading to a certificate of general equivalence.'' Doing so avoids triggering the lifetime 12-month limit on the use of vocational educational training.

We recognize that there may be instances in which basic skills education is embedded within a vocational educational training activity. Such basic skills education may be counted as vocational educational training as long as it is of limited duration and is a necessary or regular part of the vocational educational training. Basic skills education of this nature may enhance preparation for the labor market by giving participants an opportunity to apply their learning in the context of their future jobs.

Our definition of vocational educational training narrows the scope of what counts for this activity to programs that prepare participants for a specific trade, occupation, or ''vocation.'' This definition is consistent with definitions used in other Federal programs that provide vocational education, such as the Carl D. Perkins Vocational and Applied Technology Education Act of 1990. Even so, this definition could overlap with other TANF work activities that provide training, including on-the-job training and job skills training. Since we want to define work activities that are mutually exclusive, we are interested in comments on how States currently implement this component and whether the definition should be broadened.

Vocational educational training must be provided by education or training organizations, which may include, but are not limited to, vocational-technical schools, community colleges, postsecondary institutions, proprietary schools, non-profit organizations, and secondary schools that offer vocational education.

Under vocational educational training, States may not count unsupervised homework time as part of the hours of participation. We do, however, permit hours to count where a State structures a vocational educational training program to include monitored study sessions and it can document the hours of participation.

Job skills training directly related to employment means training and education for job skills required by an employer to provide an individual with the ability to obtain employment or to advance or adapt to the changing demands of the workplace. Job skills training can include customized training to meet the needs of a specific employer or it can be general training that prepares an individual for employment. This can include literacy instruction or language instruction when such instruction is explicitly focused on skills needed for employment or combined in a unified whole with job training. Job skills training directly related to employment should be supervised on an ongoing basis no less frequently than daily.

Some States include barrier removal activities as job skills training, such as substance abuse counseling and treatment, mental health services, and other rehabilitative activities. While we encourage States to work with individuals in these areas, the definition of job skills training focuses on educational or technical training that is designed specifically to help individuals move into employment.

Education directly related to employment, in the case of a recipient who has not received a high school diploma or a certificate of high school equivalency means education related to a specific occupation, job, or job offer. This includes courses designed to provide the knowledge and skills for specific occupations or work settings, but may also include adult basic education and ESL. Where required as a prerequisite for employment by employers or occupations, this activity may also include education leading to a General Educational Development (GED) or high school equivalency diploma. Participants in education directly related to employment should be supervised on an ongoing basis no less frequently than daily.

Participants should make ''good or satisfactory progress'' in order for their hours to count. This includes a standard of progress developed by the educational institution or program in which the recipient is enrolled. Good or satisfactory progress should be judged by both a qualitative measure of progress, such as grade point average, as well as a quantitative measure, such as a time frame within which a participant is expected to complete such education. We are interested in receiving comments that describe other possible criteria or definitions for what constitutes making ''good or satisfactory progress.''

As under other TANF educational activities, States may not count unsupervised homework time as part of the hours of participation for this activity. We do permit hours to count where a State structures a program of education directly related to employment to include monitored study sessions and it can document the hours of participation.

Satisfactory attendance at secondary school or in a course of study leading to a certificate of general equivalence, in the case of a recipient who has not completed secondary school or received such a certificate means regular attendance, in accordance with the requirements of the secondary school or course of study at a secondary school, or in a course of study leading to a certificate of general equivalence, in the case of a recipient who has not completed secondary school or received such a certificate. The former is aimed primarily at minor parents still in high school, whereas the latter could apply to recipients of any age. Unlike ''education directly related to employment,'' this activity need not be restricted to those for whom obtaining a GED is a prerequisite for employment. However, this activity may not include other related educational activities, such as adult basic education or language instruction unless it is linked to attending a secondary school or leading to a GED. Participants in this activity should be supervised on an ongoing basis no less frequently than daily.

In addition to regular school attendance at a secondary school or in a course of study leading to a certificate of general equivalence, participants should be making ''good or satisfactory progress'' for the activity to count. This includes a standard of progress developed either by the State or by the educational institution or program in which the recipient is enrolled. In addition, it must include both a qualitative measure of progress, such as grade point average, as well as a quantitative measure, such as a time frame within which a participant is expected to complete such education. We are interested in receiving comments that describe possible criteria or definitions for what constitutes making ''good or satisfactory progress.''

As under other TANF educational activities, States may not count unsupervised homework time as part of the hours of participation for this activity. We do permit hours to count where a secondary school or structured GED program includes monitored study sessions and it can document the hours of participation.

Providing child care services to an individual who is participating in a community service program means providing child care to enable another TANF recipient to participate in a community service program. Participants in this activity should be supervised on an ongoing basis no less frequently than daily.

It does not include providing child care to enable a TANF recipient to participate in any of the other eleven allowable work activities. Child care

provided to TANF recipients (and others) in other activities typically involves payment for services rendered and would be classified as unsubsidized employment. Indeed, providing child care for TANF recipients in community service could also be considered under other TANF work activities, such as unsubsidized employment, work experience, or community service. We are interested in comments that describe how this activity differs and might be distinguished from other work activities.

We caution States to implement this activity responsibly. Because assistance is time-limited, States should ensure that the activity is effective in helping move the provider toward self-sufficiency. Training, certification or mentoring will help make the activity meaningful and could be a first step toward the provider's employment in the child care field.

The Deficit Reduction Act of 2005 also requires us to include families receiving assistance under a separate State program that is funded with money counted towards the State's MOE requirement and to specify the circumstances under which a parent who resides with a child who is a recipient of assistance should be included in the work participation rates. The simplest way for us to do this was to use a new term, ''work-eligible individual'' to describe anyone whose participation in work activities contributes to determining whether the family counts in the calculation of the work participation rate. We drew the term from the heading to the statutory section with this new requirement.

Thus we define a *work-eligible individual* as one of two types of adults. The first is an adult (or minor child head-of-household) *receiving assistance* under TANF or a separate State program, unless excluded. The second is a *non-recipient parent* living with a child receiving assistance, unless the parent is a member of one of three excluded groups of parents described below.

In drafting this provision of the regulations, we considered in turn each type of family in which a parent resides with a child recipient of assistance to determine whether it was appropriate to include that group of families in the calculation of the work participation rates. We chose to exclude the following non-recipient parents living with a child receiving assistance from the definition of work-eligible individual: a minor parent who is not a head-of-household (or a spouse of head-of-household); an alien who is ineligible to receive assistance due to his or her immigration status; and, at State option on a case-by-case basis, a recipient of Supplemental Security Income (SSI) benefits. We have excluded these groups because they either cannot receive TANF-funded services or it would be inappropriate to require them to work. For example, many immigrant families lack a work authorization or permit and requiring these adults to work would be a violation of their immigration status. In the case of non-recipient minor parents, we want to encourage them to stay in school and complete their education.

Unless otherwise excluded above, we chose to include all other non-recipient parents living with a child receiving assistance as work-eligible individuals. This new language primarily adds child-only cases to the work participation rates, but could include some two-parent cases where both parents live in the household but one is not part of the assistance unit. In particular, it adds families in which non-recipient parents were removed from a case due to a sanction or a State time limit. We have included these groups because expecting parents to participate in work activities is consistent with the goal of reducing dependency by promoting work. Further, such a policy improves the consistency of the work participation rate calculation across States, specifically called for in the Deficit Reduction Act of 2005.

To illustrate the importance of including these families, consider the situation of a parent whose needs have been removed from the case due to a work-related penalty. The effect on a family's grant of removing a parent's needs from the assistance unit is often no different from the effect of a sanction that uses a fixed percentage or dollar amount. Yet, under the original TANF rules, cases with a parent's needs removed were excluded from the calculation of work participation rates because they became child-only cases, whereas those subject to fixed percentage or dollar amount sanction methods were, by law, excluded for a maximum of only three months in a 12-month period. Under the interim final rule, we bring consistency to how we treat all sanction methods in the participation rates. Similarly, families in which non-recipient parents whose needs have been removed from the case for other types of sanctions will now be included in the calculation of work participation rates.

We give States the option of including on a case-by-case basis families in which a non-recipient parent receives SSI. SSI recipients are not eligible for TANF benefits and we recognize that many are unable to work. Therefore it would not be appropriate to require inclusion of their families in the rates. However, the Social Security Administration is working to remove disincentives to work from the SSI program, and we would like to encourage States to support these efforts through their TANF programs. Therefore, we will allow States to receive credit toward the TANF participation rates for any parents that are able to participate in these efforts by including their families in both the numerator and the denominator of the calculation of the participation rate on a case-by-case basis.

We also chose to exclude from the definition of a work-eligible individual a parent providing care for a disabled family member living in the home who does not attend school on a full-time basis. The State must provide medical documentation to support the need for the parent to remain in the home to care for the disabled family member. We recognize that parents responsible for disabled family members often encounter problems finding affordable and appropriate care and may not be able to participate in TANF work activities to the same extent as other adults. We therefore exclude them from the participation rate calculation. We chose not to count their participation as one of TANF's work activities, as several States did under prior rules, because this activity cannot be easily supervised and is not focused on preparing individuals for unsubsidized employment.

In drafting this interim final rule, it has been our goal to ensure that States can meet the needs of all individuals in their caseloads. We are interested in receiving comments about our approach in this area, particularly with respect to a State's ability to serve families struggling to escape welfare dependency in which there is an individual with a disability.

Finally, readers should note that the definition of ''work-eligible individual'' does not include individuals in families served under an approved Tribal TANF program, even if those families receive State MOE funding, unless the State includes those Tribal families in calculating work participation rates, as permitted under § 261.25.

Subpart A—What Are the Provisions Addressing Individual Responsibility?

We made no changes to this subpart.

Subpart B—What Are the Provisions Addressing State Accountability?

Section 261.20 How will we hold a State accountable for achieving the work objectives of TANF?

At the heart of PRWORA was the expectation that we hold States accountable for moving families from welfare to self-sufficiency through work. Each State had to meet two separate work participation rates that reflected how well it succeeded in engaging adults in work activities. The minimum participation rate for adults in all families (the overall rate) started at 25 percent in FY 1997 and rose to 50 percent in FY 2002 and thereafter. The minimum participation rate for adults in two-parent families (the two-parent rate) was 75 percent in fiscal years 1997 and 1998, increasing to 90 percent afterward. A State that failed to meet the required participation rates was subject to a monetary penalty. The Deficit Reduction Act of 2005 retains the 50 percent participation requirement for all families and the 90 percent requirement for two-parent families, but includes families in separate State programs in the calculation of the respective work participation rates.

Our original TANF rule included similar but separate regulatory provisions for the ''overall'' and ''two-parent'' participation rates. These same distinctions and provisions are continued in this interim final rule, but we extend the calculation of work participation rates to include families with a work-eligible individual in order to conform to our new wording on calculating the work participation rates. We also added a reference to the years that the participation rates apply.

Section 261.21 What overall work rate must a State meet?

Under PRWORA, the overall participation rate for adults in families started at 25 percent in FY 1997 and increased by five percentage points each year to 50 percent in FY 2002 and thereafter. Under our prior TANF rules, this section of the regulation included a chart of the minimum participation rates required by fiscal year. The Deficit Reduction Act of 2005 continues the overall work participation rate at 50 percent in FY 2006 and thereafter. Under the interim final rule, we have deleted the former phased-in participation rate chart and updated the language to reflect these statutory requirements.

Section 261.22 How will we determine a State's overall work rate?

To determine a State's participation rate, PRWORA called for dividing the number of families receiving TANF assistance that include an adult or a minor child head-of-household engaged in work activities by the total number of such families, excluding families sanctioned that month for refusal to participate in work activities, as long as they had not been penalized for more than three months in the preceding 12-month period. A State could also exclude from the denominator single-parent families with a child under the age of one for not more than a total of 12 months or include or exclude families receiving assistance under a tribal family assistance plan or under a tribal Native Employment Works (NEW) program.

The Deficit Reduction Act of 2005 modifies the work participation rate calculation to include families with an adult or minor child head-of-household under State programs funded with qualified State expenditures and other work-eligible individuals, which we have defined in § 261.2. In §§ 261.22(a)(2) and (b)(1), we simply modify the prior language to reflect this new calculation.

In general terms, the original participation rate calculation excluded two categories of families. First, it excluded families subject to a work sanction for not more than three months in the preceding twelve months. Second, it excluded (for a maximum of 12 months) families in which a single custodial parent is caring for a child less than one year old. In this interim final rule, we clarify that States may apply both of these exclusions on a case-by-case basis for families with a work-eligible individual §§ 261.22(b)(3) and (c)(2).

As we note in the preamble to § 261.24, we do not consider a two-parent family with a disabled work-eligible individual to be a two-parent family for work participation rate purposes. The statute directs us to exclude these families from the two-parent work participation rate calculation, but not from the overall work participation rate calculation.

Similar to the policy we allowed under the original TANF rule, States may now count families for a partial month if a work-eligible individual is engaged in work for the minimum average number of hours in each full week that the family receives assistance.

This policy is now added to the rule at § 261.22(d)(1). States that pay benefits retroactively also have the option to consider the family to be receiving assistance during the period of retroactivity under § 261.22(d)(2).

Section 261.23 What two-parent work rate must a State meet?

Under PRWORA, the overall participation rate for two-parent families started at 75 percent in FY 1997 and increased to 90 percent in FY 1999 and thereafter. Under prior TANF rules, this section of the regulation included a chart of the minimum participation rates required by fiscal year. The Deficit Reduction Act of 2005 continues the two-parent work participation rate at 90 percent in FY 2006 and thereafter. Under the interim final rule, we have deleted the former phased in participation rate chart and updated the language to reflect these ongoing statutory requirements and dates.

Section 261.24 How will we determine a State's two-parent work rate?

The Deficit Reduction Act of 2005 modifies the statute to include in the two-parent work participation rate calculation two-parent families in ''State programs funded with qualified State expenditures.'' It also gave us the authority to include other two-parent families with work-eligible individuals, which we have defined in § 261.2. In §§ 261.24(a)(2), (b)(1) and (b)(2) we modify the language to reflect the new statutory participation rate calculation.

The original two-parent participation rate calculation also excluded families subject to a work sanction for not more than 3 months in the preceding 12 months. We modify this exclusion at § 261.24(b)(2) to apply to two-parent families with work-eligible individuals.

Additionally, under § 261.24(d) we clarify two provisions of current policy: (1) We count toward the participation rate those families receiving assistance for a partial month if a work-eligible individual is engaged in work for the minimum average number of hours in each full week that the family receives assistance; and (2) States that pay benefits retroactively also have the option to consider the family to be receiving assistance during the period of retroactivity.

Unchanged by the Deficit Reduction Act of 2005, we will continue to sum the participation hours of both parents in the assistance unit when calculating the two-parent rate. This differs from the way two-parent families are treated in the overall work rate, which requires that all of the participation requirements be met by one of the adults in the assistance unit. Also, as under PRWORA and the original rule in paragraph (e) of this section, we do not

consider a two-parent family with a disabled work-eligible individual to be a two-parent family for work participation rate purposes.

Section 261.25 Do we count Tribal families in calculating the work participation rate?

This section of the prior rule permits a State to include families that are receiving assistance under an approved Tribal family assistance plan or under a Tribal work program in calculating the State's participation rate. We have made a slight change to this section in the interim final rule by adding the term ''with a work-eligible individual'' after family to be consistent with our revised calculation methods and the definition of a work-eligible individual in § 261.2.

Subpart C—What Are the Work Activities and How Do They Count?

We revised only two sections of subpart C.

Section 261.31 How many hours must a work-eligible individual participate for the family to count in the numerator of the overall rate?

As we explained in § 261.2, we added a new definition of a work-eligible individual for purposes of calculating the work participation rates. The only changes we have made to § 261.31 are to incorporate this phrase into the heading and to substitute the phrase ''work-eligible individual'' for the word ''individual'' where it is appropriate.

We would like to emphasize that under these rules States retain the flexibility to assign an individual to a combination of activities, for example blending school and work or training and work or job search and community service, to reach the hours needed to count a family in the rate. We encourage States to use this approach where it best serves the needs of their clients.

A work-eligible individual who participates in a work experience or community service program that is subject to FLSA requirements cannot be required to participate in that work activity for more hours than the welfare grant divided by the minimum wage. For some families, the TANF grant divided by the minimum wage does not result in enough hours to satisfy TANF's minimum hourly requirements. In general, a TANF grant of less than $446 would result in fewer than 20 hours of countable participation per week through an activity that is subject to the FLSA requirements. (This amount is based on the Federal minimum wage; it would be smaller in States that have a higher State minimum wage.) For a family of three, the maximum TANF grant in about 30 States is less than $446 per month; however, the FLSA calculation is not limited to the TANF grant.

According to the Department of Labor's guidance entitled ''How Workplace Laws Apply to Welfare Recipients'' (May 1997), a State may count the cash value of food stamps toward participation requirements if the State adopts a food stamp workfare program. In addition, a State could adopt a Simplified Food Stamp Program, which would allow it to match its food stamp exemptions to those of its TANF program. For example, the Food Stamp Program exempts single parents with a child under age 6 from participation. Adopting a Simplified Food Stamp Program would allow a State to count food stamp benefits toward the hours of required participation for this otherwise exempt group. By adding the value of food stamps, recipients in most States could meet current TANF's requirement for 20-hour per week of core activities. Indeed, the combined TANF/Food Stamp benefit in all States for a family of three or more exceeds the $446 threshold.

Even after counting the value of food stamps, in some States TANF families with just one or two people in the assistance unit may still not have a large enough combined TANF/food stamp grant to generate the 20 hours per week of participation needed to satisfy TANF's core activity requirement. The combined benefits also may not be enough for families that have unearned income, such as Social Security and child support, and do not receive the maximum TANF grant. Moreover, some TANF families do not receive food stamps, so there is no food stamp benefit to add to the calculation.

Under this interim final rule, we allow States to count any family that participates the maximum hours it is allowed under the minimum wage requirement of the FLSA as having satisfied the 20-hour per week core activity requirement if actual participation falls short of 20 hours per week. We are limiting this policy to States that have adopted a food stamp workfare program and a Simplified Food Stamp Program to ensure that recipients participate to the fullest extent possible and that the calculation of the work participation rate is based on uniform standards across all States. The Simplified Food Stamp Program must be structured to match food stamp exemptions to those of the TANF program so that work requirements could be applied to as many work-eligible individuals as possible. Families that need additional hours beyond the core activity requirement must satisfy them in some other TANF work activity.

This policy respects the protections that the FLSA affords to individuals in positions subject to the minimum wage requirement. At the same time, it gives added flexibility in the work participation rate for States that maximize the hours they can require of individuals in such positions.

We considered remaining silent on FLSA; however, given the challenge of meeting the work participation rates under the Deficit Reduction Act of 2005, we thought it important to address this issue in a consistent and fair manner. Nearly all States have some cases that cannot meet the 20-hour minimum required in core work activities to count toward the work participation rate. The FLSA clarification provides States with increased flexibility to assign work activities and meet work participation rates while treating participants subject to the FLSA requirements fairly. We also considered establishing a maximum number of hours that a State could use to meet the core hour requirement, such as 5 hours per week. While this would be an improvement over existing rules, a 5-hour cap would only address a portion of the affected cases and would be administratively complex; therefore we decided against this approach.

Section 261.32 How many hours must a work-eligible individual participate for the family to count in the numerator of the two-parent rate?

In similar fashion to § 261.31 above, we substituted the phrase ''work-eligible individual'' for the word ''individual'' in the heading and in the section as needed to clarify how States can count hours and the calculation of the two-parent work participation rate. Again, we stress that States may combine the activities to which it assigns individuals, blending, for example, school and work or training and work or job search and community service, to reach the hours needed to count a family in the work participation rate.

As we do for single-parent families, when two-parent families have work-eligible individuals in work activities subject to the minimum wage requirement of the FLSA, we will count any family that participates the maximum hours allowable as having satisfied the 30-hour per week (or 50-hour per week, if the family receives federally-funded child care) core activity requirement, even if actual participation falls short of 30 (or 50) hours per week. For a more detailed

discussion of this policy, please refer to the preamble to § 261.31.

Subpart D—How Will We Determine Caseload Reduction Credit for Minimum Participation Rates?

Under PRWORA, the caseload reduction credit reduces the required work participation rate that a State must meet for a fiscal year by the percentage that a State reduces its overall caseload in the prior fiscal year compared to its caseload under the title IV–A State plan in effect in FY 1995, excluding reductions due to Federal law or to State changes in eligibility criteria. The Deficit Reduction Act of 2005 recalibrates the caseload reduction year by establishing a new FY 2005 base year, which is reflected in this interim final rule in §§ 261.40, 261.41 and 261.42.

Because of the sharp caseload decline since FY 1995, the caseload reduction credit had virtually eliminated participation requirements for most States. By recalibrating the base year for the caseload reduction credit, this provision encourages States to help families become independent.

Section 261.40 Is there a way for a State to reduce the work participation rates?

In this section, we have eliminated the obsolete reference to FY 1995 and replaced it with the new base year of FY 2005, as required by the Deficit Reduction Act of 2005. The caseload reduction credit for a fiscal year equals the percentage point decline in the caseload, net of eligibility changes, between FY 2005 and the prior-year caseload. To simplify the language at § 261.40(a)(3), we have also created a new term—''comparison year''—to refer to the fiscal year that precedes the fiscal year to which the credit applies.

For the two-parent participation rate, our interim final rule continues to allow a State to use the caseload decline, net of eligibility changes, of either the two-parent caseload or the overall caseload.

As under current policy, § 261.40(b)(1) of the interim final rule clarifies that the calculation of the caseload reduction credit must disregard caseload reductions due either to changes in Federal law or to changes that a State has made in its eligibility criteria in comparison to the criteria in effect in the new base year of FY 2005. However at § 261.40(b)(2) we clarify that a State may reduce or offset the disregard for caseload reductions due to changes in eligibility criteria that increase caseloads. In other words, the revised regulatory language simply clarifies our continuing policy: We will calculate a net impact of eligibility changes (i.e., caseload decreases minus increases) if the State provides information on changes that increase the caseload. A State is under no obligation to provide the impacts of changes that increase the caseload. Such impacts merely serve to offset the effects of eligibility changes that decrease the caseload and as such are to a State's advantage because they may make for a larger credit.

We will continue to base the caseload decline on the combined TANF and Separate State Program caseload figures for families receiving assistance. As indicated at § 261.40(c), we will use the ACF–199, TANF Data Report, and the ACF–209, SSP–MOE Data Report, to establish both the FY 2005 base-year and the comparison-year caseloads. We have deleted references to earlier data reports needed for the FY 1995 base year. This rule continues to allow States to correct erroneous data and make adjustments to include unduplicated data.

Section 261.41 How will we determine the caseload reduction credit?

Again in this section, we have substituted FY 2005 for any prior reference to FY 1995, as required by the Deficit Reduction Act of 2005. Our interim final rule maintains the same general caseload reduction methodology, while simplifying some of the reporting requirements.

In particular, we have eliminated the requirement formerly located at § 261.41(a)(1), (b)(5) and (b)(6) that States report caseload closure and application denial information because we have found that this information is not always relevant or helpful in estimating the impact of an eligibility change. Instead, a State should submit whatever data or analyses are most relevant for estimating the average monthly impact of individual policy changes on the comparison-year caseload and include that information as an attachment to its ACF 202—TANF Caseload Reduction Report. Those materials should clearly show the step-by-step processes the State uses to arrive at each impact and should demonstrate how the State took into account the effect of the change over time. In conjunction with this interim final rule, we are revising the Caseload Reduction Report form to accommodate the revisions to the credit calculations and to reduce the reporting burden on States.

The interim final rule continues to require under § 261.41(b)(6) that a State certify that it has provided the public an opportunity to comment on the estimates and methodology and incorporated all net reductions resulting from Federal and State eligibility changes. We have, however, dropped the prior requirement that States submit a summary of public comments received about the proposed methodology, as we have not found this helpful to the process of calculating the credits.

The interim final rule also clarifies at § 261.41(c)(2) the language permitting a State requesting a caseload reduction credit for its two-parent caseload to base its estimate on either the change in its two-parent caseload or on the decline in its overall caseload. We made no changes to paragraphs (d), (e) or (f) of the prior rule.

Section 261.42 Which reductions count in determining the caseload reduction credit?

We revised language in § 261.42(a) to clarify that the caseload reduction credit calculation must disregard caseload reductions due either to Federal law or to changes in State eligibility criteria in comparison to the criteria in effect in FY 2005; however, a State may also reduce the disregard for caseload reductions due to changes in eligibility criteria that increase caseloads. As we explained in the preamble to § 261.40, this change only clarifies our ongoing policy of calculating the net impact of eligibility changes (i.e., caseload decreases minus increases) where a State provides information on the impacts of policies that expanded eligibility. In addition, we also incorporated into the regulation at § 261.42(a)(3) our existing policy that a State may not receive a caseload reduction credit that exceeds the actual caseload decline between FY 2005 and the comparison year.

At § 261.42(b), we also clarified in the regulatory language that a State include Separate State Program cases in both its base-year and its comparison year caseloads. We have eliminated the reference to ''cases made ineligible for Federal benefits by Pub. L. 104–93.'' It is no longer relevant due to the change in the base year to FY 2005, required by the Deficit Reduction Act of 2005. Indeed, the new base year also means many caseload reductions due to State changes in eligibility criteria no longer apply because such policies were in effect in the new, recalibrated base year of FY 2005.

Section 261.43 What is the definition of a ''case receiving assistance'' in calculating the caseload reduction credit?

Our interim final rule does not make any changes to the definition of a ''case receiving assistance'' in calculating the

caseload reduction credit. The only change we have made in this section is the elimination of the reference to a State's implementation date formerly in § 261.43(b) which is no longer applicable, with the statutory change in the base year to FY 2005.

Section 261.44 When must a State report the required data on the caseload reduction credit?

Our interim final rule continues to require that a State report the necessary documentation on caseload reductions for the preceding fiscal year by December 31. We have removed the reference to our intent to notify a State of its caseload reduction credit no later than March 31. Discussions with States about their caseload reduction methodology, negotiations about necessary changes, and requesting and receiving additional data and documentation have often gone beyond the prior notification date of March 31. This in no way represents a change in our intention to issue caseload reduction credits as early in a fiscal year as possible.

Subpart F—How Do We Ensure the Accuracy of Work Participation Information?

Under our prior rules, subpart F was entitled ''How Do Welfare Reform Waivers Affect State Penalties?'' Because this subpart now only applies to one State, we moved the subpart to subpart H, with appropriate re-designation and renumbering changes. We also think the new work verification provisions of the Deficit Reduction Act of 2005 more logically follow the discussion of participation requirements and the caseload reduction credit, so we have added them under a new subpart F.

Under the Deficit Reduction Act of 2005, HHS is required to promulgate regulations to ensure consistent measurement of work participation rates. The statute directs the Secretary to include information with respect to (1) determining whether the activities of a recipient of assistance may be treated as a work activity; (2) establishing uniform methods for reporting hours of work of a recipient of assistance; (3) identifying the types of documentation needed by the State to verify reported hours of work; and (4) specifying the circumstances under which a parent who resides with a child who is a recipient of assistance should be included in the work participation rates.

A reliable and consistent work participation measurement system requires uniformity among States in identifying work-eligible individuals and in the counting of work hours. To help achieve this goal, we defined a work-eligible individual and each of the work activities in § 261.2 and created new sections describing methods for reporting and the types of documentation needed to verify a work-eligible individual's hours of participation. To verify work participation information under these rules, each State must establish and maintain the procedures and internal controls outlined below. The following provides the specific new verification requirements we added and the statutory authority for these requirements.

Section 261.60 What methods may a State use to report a work-eligible individual's hours of participation?

Under the prior TANF rule, some States asked whether they were required to report actual hours of participation or whether they could report required or scheduled hours. We replied that ''The State must report the actual hours of participation for each work activity. Reporting required (or scheduled) hours of participation is inconsistent with the 'complete and accurate' standard and is not acceptable.'' (See the answer to question #42 under TANF Reporting Questions under TANF Program Policy Questions and Answers, which can be found on our Web site at: *http://www.acf.dhhs.gov/programs/ofa/polquest/sectone.htm.*)

Our interim final rule at § 261.60(a) makes the existing policy of counting only actual and not scheduled hours explicit in the regulations. The new legislative language in the Deficit Reduction Act of 2005 makes clear that Congress intended that only actual hours of work activities should count toward the participation rates. Allowing scheduled hours would both introduce inconsistencies among States and reduce the incentive for States to ensure that recipients actually participate for the hours they are assigned. Thus, each State must have in place a system for determining whether the hours they report toward the participation rates correspond to hours in which work-eligible individuals actually participate in work activities. The State must describe this system as part of its Work Verification Plan, which we explain in detail at § 261.62.

Under § 261.60(b) of these interim final rules, we continue to permit States to follow ordinary practice for counting work time by basing it on the hours for which the individual was paid, thus allowing for occasional absences due to paid holidays and sick leave. We recognize that all clients, regardless of the activity in which they participate, may miss work or training because of a holiday or a temporary illness.

Thus, our interim final rule permits States to count limited excused absences for individuals in unpaid allowable work activities. A State may define and count reasonable short-term, excused absences for hours missed due to holidays and a maximum of 10 additional days of excused absences in any 12-month period, no more than two of which may occur in a month. In order to count an excused absence as actual hours of participation, the individual must have been scheduled to participate in an allowable work activity for the period of the absence that the State reports as participation.

We believe the 10-day limitation for additional days beyond holidays is an appropriate accommodation that takes into consideration varying work-site and educational practices as well as unexpected events that cause a work-site to close or an individual to miss scheduled hours. Each State must describe its ''excused absence'' policies and practice as part of its Work Verification Plan described below in § 261.62. We considered not addressing excused absences for unpaid participants but rejected this alternative in order to treat recipients in all activities equitably. We also considered permitting more days of excused absences but decided on 10 based on a typical accrued leave scenario for working families. For example, many places of employment allow employees to accrue one half day of leave per two-week pay period, which accounts for about 13 days over a calendar year. These individuals often work 40 hours per week. Our decision to allow 10 days is based on required hours of 20 or 30 hours per week in non-paid work.

We want to emphasize that this ''excused absence'' policy applies to what may be counted in the Federal participation rate. The policy in no way limits a State's flexibility to excuse absences or otherwise make accommodations in the participation requirements it imposes on individuals. That is why the participation requirement is only 50 percent. An individual's requirements are set by the State balancing the goals of the program, the needs of the family, and obligations under the Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act of 1973. Thus, the State may require more or fewer hours of the individual than needed to count the family toward the Federal participation rate. States may also have a more expansive or a more restrictive list of allowable activities than those

that count to meet the Federal participation rate.

Under § 261.60(c) of the interim final rule, we make clear that, in the case of self-employment, as we noted in our discussion of the definition of unsubsidized employment in § 261.2, we will not permit a State to count more hours toward the participation rate for a self-employed individual than the number derived by dividing the individual's self-employment income (gross income less business expenses) by the Federal minimum wage. A State may propose an alternative method of determining self-employment hours as part of its Work Verification Plan.

Finally as a reminder of current policy, because some weeks fall across more than one month, we allow States to choose one of three methods to calculate the average hours per week for such a month. A State may decide that the week falls in the month that includes the majority of the days of that week; it may include the week in the month in which the Friday falls; or it may count each month of the fiscal year as having 4.33 weeks. We considered establishing a single method to promote consistent work participation measurement but ultimately decided against regulating in this area. Any differences in State approaches average out over the fiscal year and thus do not result in inconsistent measurement. In our view, the appeal of a single method does not justify the administrative burden on States that would need to change their data reporting systems.

Section 261.61 How must a State document a work-eligible individual's hours of participation?

To clarify recordkeeping requirements with respect to participation, the interim final rule at § 261.61(a) adds an explicit requirement that a State must verify through documentation in the case file all hours of participation that it reports. The Work Verification Plan required at § 261.62 must describe the forms of documentation that the State will use. Under this requirement, a State may not report data to us on the basis of ''exception reporting'' where States assume that clients participate in all scheduled hours unless it receives a report to the contrary from a service provider.

As explained at § 261.61(b), we expect that many States will continue to use pay stubs as the basis for documenting hours of participation in unsubsidized employment, provided by either the employee or employer at State-specified periods. This approach has significant advantages: It uses an existing system of valid documents for which the employer has great incentives to ensure accuracy, and it minimizes reporting burden. Other possibilities include timecards, sign-in/sign-out sheets, and rosters with recorded hours of work.

We encourage States to develop systems that minimize requests for documentation from an employer of an employee's hours of participation. We want to ensure that our documentation and verification requirements do not discourage work by placing an undue burden on the employer because a primary goal of TANF is to help clients achieve self-sufficiency through unsubsidized work.

Under § 261.61(c) of the interim final rule, we permit States to report projected actual hours of unsubsidized or subsidized employment or OJT for up to six months at a time on the basis of prior, documented actual hours of work. This rule is similar to the ''prospective budgeting'' that was used to calculate earned income and grant amounts under the former AFDC program. If a State chooses to project actual hours of work, the State must provide its policies and practices in its Work Verification Plan required under § 261.62(b).

An example will illustrate what we envision. Based on valid documentation such as pay stubs, or employer reports, a State knows that a client averages 32 hours of work per week. As long as the State receives no conflicting information, the State may report 32 hours of participation a week in employment for a maximum of the next six months. At the end of this six-month period, the State must obtain new valid documentation or re-verify the client's current, actual average hours and these hours may be reported for another six-month period. If, at any time, the State becomes aware of a change in the client's work situation, the new actual hours must be documented and may be prospectively reported for six months. For example, if a client requests a grant adjustment due to either increased or decreased wages, this report would require documentation and a restatement of the actual hours of participation.

In developing this option, we considered whether the timeframe should be shorter, for example three months. However, we believe that a six-month period appropriately balances the administrative burden with the Deficit Reduction Act's new emphasis on verification and documentation. We want to emphasize that this method of reporting projected actual hours is only permitted for paid employment under the activities of unsubsidized employment, subsidized employment or OJT.

For non-employment activities, as outlined in § 261.61(d), we believe States should require service providers to document the hours of their clients' participation. Documentation could include time sheets, service provider attendance records and school attendance records. If there are other documents that would substantiate the hours an individual participates in these activities, the State should specify them in its plan. Contractual arrangement with service providers of work activities should require documentation of the hours in which an assigned recipient participates.

Section 261.61(e) relates to reporting self-employment hours. In such cases, there is neither an employer to issue a pay stub nor a supervisor or teacher to monitor participation. Therefore, the State needs another approach to documenting the hours it reports for the participation rate. Under these circumstances, we will allow States to count the number of hours derived by dividing the individual's self-employment income (gross income less business expenses) by the Federal minimum wage. A State may propose an alternative method of determining self-employment hours as part of its Work Verification Plan. We will not approve plans that provide for an individual's self-reporting of participation without additional verification.

Section 261.62 What must a State do to verify the accuracy of its work participation information?

The Deficit Reduction Act of 2005 requires the Secretary to issue rules on determining whether activities may be counted as work activities, verifying countable hours of work, and determining who is a work-eligible individual. Under § 261.62(a), a State must establish and employ procedures for: (1) Determining whether its work activities may count for participation rate purposes; (2) determining how to count and verify reported hours of work; (3) identifying who is a work-eligible individual; and (4) internal controls to ensure compliance with the procedures; and (5) submit a complete Work Verification Plan to the Secretary for approval. We outline our expectations and guidelines for these requirements below.

Procedures for determining whether work activities may count for participation: Under § 261.62(b)(1)(i) for each of its work activities, a State must establish procedures to ensure that the activity is consistent with one of the work definitions in § 261.2. Hours of participation must be reported for the proper countable work activity. For

example, our definition of a community service program excludes activities that do not directly benefit the community. Therefore, family- and self-improvement activities can no longer be counted as a community service work activity in the participation rate. For each work activity, the State's procedures should specify the types of situations and range of activities which will be included.

Procedures for determining how to count and verify reported hours of work: Under § 261.62(b)(1)(ii), for each countable work activity in which a work-eligible individual participates, States must report the actual hours of participation in the report month and calculate and report the average hours of participation per week for each month in the quarter. Acceptable documentation for the reported hours must be based on affirmative reports that the individual actually participated for the reported hours, rather than an exception reporting system.

Under § 261.62(b)(1)(iii), for each of the work activities, a State must describe in its Work Verification Plan the documentation it uses to monitor participation and ensure that it reports actual hours of participation. While all activities must be supervised no less than daily to count in the work participation rate, we are establishing a range of documentation guidelines that vary by type of activity. Job search and job readiness assistance should be documented daily due to the short-term nature of this activity. Other unpaid work activities, including work experience, community service programs, vocational educational training, and providing child care to participants in community service programs, require documentation of hours of participation no less than every two weeks. For paid employment, as we explain in the preamble to § 261.61(c), States may report projected actual hours for up to six months at a time. Readers should refer to § 261.61 for additional detail about documentation requirements.

Currently, States may report the family and individual-level data that HHS uses to calculate work participation rates on either a sample or population basis. To minimize the documentation verification burden on States that report using a sample, we expect to focus audits and reviews on the sample cases used to calculate participation rates. These sample cases should contain all the documentation needed to count and verify reported hours of work and identify who is a work-eligible individual. It is important for States using population data to ensure that all cases contain all the documentation needed to count and verify reported hours of work and identify who is a work-eligible individual. We would be interested in suggestions or approaches as to how to minimize the documentation burden for the States that report the entire universe of population data.

Procedures for identifying who is a work-eligible individual: [§§ 261.62(b)(2) and (3)] The Deficit Reduction Act of 2005 requires the Secretary to identify the circumstances under which a parent who resides with a child who is a recipient of assistance should be included in the work participation rates. Thus, we have defined a work-eligible individual in § 261.2 and have added a data element ''Work-eligible Individual Indicator'' to the quarterly data reports. This definition includes all adults and minor child heads-of-household receiving assistance and some non-recipient parents.

Identifying adult and minor child head-of-household recipients as work-eligible individuals should not be difficult—they have been included in the work participation rates since the inception of the TANF program. However, we now require that some non-recipient parents be included to ensure consistent work participation rates. For example, a parent whose needs have been removed from the grant due to a work-related sanction is included in the definition of a work-eligible individual and in the work participation rate. (Please refer to the discussion in the preamble to § 261.2 for more detail about the definition of a work-eligible individual.) State procedures must be able to identify all individuals in TANF and separate State programs claimed for MOE (SSP–MOE) families who meet the definition of a work-eligible individual.

Internal controls to ensure compliance with the procedures: Each State, under § 261.62(b)(5) must develop internal controls and procedures that are sufficient to verify and validate the work participation rates. Internal controls include the State's mechanism for monitoring the quality of its work participation data and may entail such approaches as a secondary-stage supervisory review, special studies, regularly scheduled audits or ongoing sampling and quality assurance processes that are used to monitor adherence to established policies and work verification procedures by staff and contractors.

Work Verification Plan: Paragraph (b) of § 261.62 describes what must be included in a State's Work Verification Plan. The plan must include a description of the procedures and documentation requirements outlined above. In addition, under § 261.62(b)(3) a State must include a description of how it: Accurately inputs into its automated data processing system; properly tracks the hours; and accurately reports the hours. Paragraph (b)(4) requires a description of the procedures for ensuring that only hours of participation in an activity that meets a Federal definition are transmitted as countable work activities and paragraph (b)(5) requires a description of the internal controls to ensure a consistent measurement of the work participation rates, including any quality assurance processes and sampling specifications. Under paragraph (c) we state that we will review a State's plan for completeness and approve it if we believe it will result in accurate reporting of work participation information.

States may develop internal control and verification systems that match their unique program resources and operational requirements. Some States rely on client information systems and/or use integrated data warehouses to collect and process work participation information. These States are able to compile electronically all or most of the work participation data items, control for the special rules and conditions that apply to the Federal work activities, compute the average hours across all activities for the month, perform item-by-item edit checks, and control for internal consistency and completeness of the work participation data. Some systems can validate the work data against the National Directory of New Hires database or State Employment Security files. Other States may rely on TANF case managers to accurately track the participation data, including the participation hours and application of the special rules and conditions.

Some current systems may be inadequate to meet the new verification and validation requirements of the statute and this rule. States may need to develop and conduct quality assurance systems and tests. Using these procedures, States could: (1) Perform case reviews to validate the accuracy of the data reported; (2) examine documentation for the reported hours of work; (3) test how the hours of participation were calculated; (4) check how data is tracked through the system; (5) review the verification procedures to ensure they are doing what was intended; and (6) check what procedures State staff, local staffs, and contractors are actually using to document, count and report hours of participation.

The State's Work Verification Plan also should describe the State's procedures for controlling for data errors in inputting work participation items to the TANF report file. These include transcription and coding errors, data omissions, computational errors, and compilation errors. The plan should document the checks used to isolate electronic systems and programming errors and the steps to ensure that all work participation report items are internally consistent. If sampling is used to perform quality assurance tasks to test the validity of the participation information, the State should include the sampling specifications in its verification plan.

Section 261.63 When is the State's Work Verification Plan Due?

In accordance with the Deficit Reduction Act of 2005, paragraph (a) requires that each State submit its interim verification procedures for validating work activities reported in the TANF Data Report and, if applicable, the SSP–MOE Data Report to the Secretary no later than September 30, 2006. In addition, under paragraph (b), a State must submit revisions requested by the Department within 60 days of receipt of our notice, and must submit and operate under an approved Work Verification Plan no later than September 30, 2007.

Paragraph (c) describes the time frame for submitting a revised verification plan to the Secretary for approval. A State must submit its revised Work Verification Plan by the end of the quarter in which the State modifies its procedures or internal controls. Validating work activities is an ongoing process that uses internal controls to check that staff is properly applying the verification procedures, to ensure that computer systems have been accurately programmed to implement the verification procedures, and to ensure the verification procedures are working properly. As problems are identified, a State may need to modify its verification procedures and/or internal controls.

Section 261.64 How will we determine if the State is meeting the requirement to establish and maintain work verification procedures that ensure an accurate measurement of work participation?

The Deficit Reduction Act of 2005 adds a new penalty provision to the Social Security Act at section 409(a)(15) for a State's failure to establish or comply with its work participation verification procedures. We will determine whether to impose this penalty based on two conditions. First, as provided in paragraphs (a) and (b), the State will be liable for a penalty if it fails to establish its work verification procedures by submitting its interim Work Verification Plan by September 30, 2006, or it fails to have its complete plan approved by September 30, 2007. A complete Work Verification Plan includes all the information required by § 261.62(b) and a certification that it accurately reflects State operating procedures.

Second, as set forth in paragraph (c), beginning in FY 2008, we will use the single audit under OMB Circular A–133 in conjunction with other reviews, audits, and data sources to assess the validity of a State's internal control procedures and the accuracy of the data filed by States to calculate the work participation rates. We will determine whether a State is penalty-liable based on the findings drawn from a sample of cases during the single audit or via another Federal review. Therefore, States must maintain case documentation and pertinent findings produced through its verification process for use by the single State audit or ACF in its review of the State's work participation verification system.

Section 261.65 Under what circumstances will we impose a work verification penalty for failure to submit a work verification plan or for failure to maintain adequate internal controls to ensure a consistent measurement of the work participation rates?

The new statutory penalty language at section 409(a)(15)(B) of the Social Security Act requires us to base the penalty on the State's degree of noncompliance with its work verification procedures, and that it equal an amount of not less than one percent and not more than five percent of the State's adjusted SFAG. Under paragraph (a) of this section, we will take action to impose a penalty if the State has not met the requirements of § 261.64. Under paragraph (b), if a State fails to submit its interim Work Verification Plan by the due date of September 30, 2006, or fails to revise its procedures based on Federal guidance and submit the complete plan by September 30, 2007, that we approve, we will impose a penalty of five percent, because the State will not have complied with the fundamental requirements of the law.

Under paragraph (c), if, beginning in FY 2008, we determine, through audits or special reviews, that the State has not maintained adequate documentation, verification and internal control procedures to ensure the accuracy of the data used in calculating the work participation rates over the course of a fiscal year we will base the penalty on the number of times the State fails to meet the requirements. We will impose a penalty based on the number of years that a State fails to comply, i.e., one percent of the adjusted SFAG for the first year, two percent for the second year, three percent for the third year until a maximum of five percent is reached. If a State subsequently complies with its work verification procedures for two consecutive years after any failure, we will consider a subsequent failure to be the first occurrence again.

If a penalty is assessed, we will impose it in the immediately succeeding fiscal year. States that are subject to a penalty for failure to comply with work verification procedures may claim reasonable cause as specified at § 262.5. They may also submit a corrective compliance plan to remedy the deficiency as described at § 262.6. States that elect to enter into a corrective compliance plan will have the same time frame for correcting this violation that applies to the penalty for failing to satisfy the minimum work participation rates and the penalty for failing to comply with the five-year limit on the receipt of Federal assistance under § 262.6(e)(1). Thus, any State that is subject to a penalty for failing to establish or comply with the work participation verification procedures must fully correct the violation by the end of the first fiscal year ending at least six months after our receipt of the State's corrective compliance plan. We may also require an amendment to the State Verification Plan as one of the steps the State must take to correct or discontinue the violation. We have added this requirement to § 262.6(f).

Part 262—Accountability Provisions—General

Section 262.1 What penalties apply to States?

The Deficit Reduction Act of 2005 adds an additional penalty at section 409(a)(15) of the Social Security Act for States that fail to establish or comply with work participation verification procedures. If we determine that this penalty applies, then we must reduce the adjusted SFAG payable for the immediately succeeding fiscal year by not less than one percent and not more than five percent. (See the discussion in the preamble discussion for subpart F of part 261 of this chapter.) States may avail themselves of the penalty resolution process provided in §§ 262.4 through 262.7, which may enable the State to avoid this penalty. We added

this new penalty at (a)(15) and (c)(2) of this section.

Section 262.2 When do the TANF penalty provisions apply?

The penalty for States that fail to establish work participation verification procedures takes effect on October 1, 2006. If a State does not comply with these new work participation verification procedures by October 1, 2007, it will be subject to the penalty. We have added this provision as paragraph (d) of this section. Postponing penalty action until the beginning of FY 2008 for compliance will provide States with sufficient time to implement fully the changes associated with the development of work verification procedures.

Section 262.3 How will we determine if a State is subject to a penalty?

In the preamble to §§ 261.64 and 261.65, we noted that we will impose the penalty for failure to establish or comply with work participation verification procedures based on two conditions. The first condition will depend on whether or not the State has submitted acceptable work participation verification procedures to us. The second condition will depend on the findings drawn from a sample of cases during the single audit or via another federal review. We will use the single audit under OMB Circular A–133 as well as other avenues (e.g., other reviews, audits, and data sources) as appropriate to determine whether the penalty applies. We have added these procedures to paragraph (a)(1) of this section.

Section 262.6 What happens if a State does not demonstrate reasonable cause?

States that are subject to a penalty for failure to establish or comply with work participation verification procedures will have the opportunity to claim reasonable cause as specified at § 262.5 and/or submit a corrective compliance plan to remedy the deficiency as described in this section.

In order for a State to avoid a penalty, the State must fully correct or discontinue the violation within the time frame specified in the corrective compliance plan. In paragraph (e)(1) of this section, we specified the fixed time frame in which a State must fully correct or discontinue the violation for two penalties: Failure to meet the minimum work participation rates and failure to comply with the five-year limit on the receipt of Federal TANF assistance. We have determined that the same fixed time frame should apply to this new penalty as well. Therefore, States subject to this penalty that elect to enter into a corrective compliance plan must fully correct the violation by the end of the first fiscal year ending at least six months after our receipt of the State's corrective compliance plan. We have added this penalty to § 262.6(e)(1). Also, we may require, on a case-by-case basis, an amendment to the State's verification procedures/plan as one of the steps the State must take to correct or discontinue the violation. We included this requirement at § 262.6(f).

States that are subject to a penalty for failure to meet one of the required minimum work participation rates also have the opportunity to claim reasonable cause, as specified at § 262.5. As a reminder, under the current process, States would not typically learn the results of the work participation rates for a fiscal year until the third or fourth quarter of the following year. For example, for FY 2007, after we receive the final quarter of State work participation data at the end of the first quarter of FY 2008, it will take several months to analyze the data and determine which States failed to meet the FY 2007 work participation rates and therefore are liable for a penalty. Any State that failed to meet one of the required rates then would receive a notice with several options, including, as noted above, requesting a reasonable cause exception from the penalty and entering into a corrective compliance plan to correct the violation fully. Please refer to the regulations at 45 CFR 262.4 *et seq.* for a complete explanation of that process.

We recognize that this interim final rule imposes new requirements on States, which, in some States, will require legislative action. We invite States that believe that it will be impossible to meet the work participation rates without State legislative action to submit comments explaining why it will be impossible to meet the required rates and how we should use the reasonable cause exception to provide relief from the work participation penalty.

Part 263—Expenditures of State and Federal TANF Funds

Subpart A—What Rules Apply to a State's Maintenance of Effort?

Section 263.2 What kinds of State expenditures count toward meeting a State's basic MOE expenditure requirement?

We made changes to the maintenance of effort regulations in § 263.2(a)(4) to reflect the impact of the provision in the Deficit Reduction Act of 2005 on counting spending for certain pro-family activities. Similarly, we clarified existing matching policy under a new § 263.2(e) and renumbered the former section (e) as section (f). We also added a new paragraph (g) to clarify that State funds used to meet any matching requirement under the Healthy Marriage Promotion and Responsible Fatherhood Grant may count to meet the MOE requirement in § 263.1.

As provided under PRWORA, States are subject to a cost-sharing amount known as the maintenance-of-effort (MOE) requirement. If a State fails to meet the required minimum all-family or two-parent work participation rate for a fiscal year, then the State must spend at least 80 percent of its FY 1994 historic State expenditures in that fiscal year. If the State meets both minimum work program participation rate requirements, then the required spending level decreases to 75 percent of its FY 1994 historic State expenditures.

Before the Deficit Reduction Act of 2005, States could only count toward their MOE requirement, expenditures to provide assistance, benefits, and/or services to or on behalf of eligible families, regardless of the TANF purpose that the expenditure is reasonably calculated to accomplish. Under our original rule, an ''eligible family'' must meet two fundamental criteria. First, the family must, at a minimum, consist of a child living with a custodial parent or other caretaker relative, or consist of a pregnant woman. Second, to receive benefits, the family must be financially needy according to the quantified income and resource (if applicable) criteria established by the State and contained in the State's TANF plan.

The Deficit Reduction Act of 2005 maintains the same MOE spending levels. However, the new law adds a provision ''Counting of Spending on Certain Pro-Family Activities'' at 409(a)(7)(B)(i)(V) of the Social Security Act. This provision allows States to count expenditures on pro-family activities, if the expenditure is reasonably calculated to prevent and reduce the incidence of out-of-wedlock births (TANF purpose three), or encourage the formation and maintenance of healthy two-parent married families (TANF purpose four).

This new provision allows States to claim for MOE all qualified pro-family expenditures for *non-assistance benefits and services* provided to or on behalf of an individual or family, regardless of financial need or family composition, if the activity is reasonably calculated to accomplish either TANF purpose three or TANF purpose four. We reflect this

new provision in the MOE regulation at § 263.2(a)(4). However, States must continue to limit the provision of Federal TANF and MOE-funded ''*assistance,*'' as defined in § 260.31(a) to eligible families, regardless of the TANF purpose.

Congress also created a new TANF discretionary funding stream (Grants for Healthy Marriage Promotion and Responsible Fatherhood) in the Deficit Reduction Act of 2005. Because Congress placed these funds in title IV–A of the Social Security Act, all State expenditures for allowable activities under the Healthy Marriage Promotion and Promoting Responsible Fatherhood programs specified in sections 403(a)(2)(A)(iii) and 403(a)(2)(C)(ii) of the Act may count toward the State's MOE requirement, unless a limitation, restriction or prohibition under this subpart applies.

Section 409(a)(7)(B)(iv)(IV) of the Act allows States to count expenditures made as a condition of receiving Federal funds under title IV, part A of the Social Security Act toward their MOE requirement. The Healthy Marriage Promotion Grants are under title IV, part A of the Social Security Act. Therefore, if grantees are required to contribute a matching share of the total approved costs of Healthy Marriage Promotion and Responsible Fatherhood projects under subsections 403(a)(2)(A)(iii) and 403(a)(2)(C)(ii) of the Act, then State expenditures made to meet any required non-Federal share may count toward the State's MOE requirement, provided the expenditure also meets all applicable MOE requirements, restrictions, and limitations. This provision is outlined in § 263.2(g).

The regulations at 45 CFR Part 92, which apply to the TANF program, cover matching or cost-sharing requirements. These rules permit States to count toward their MOE requirement non-Federal cash or in-kind qualified expenditures on allowable activities by a third party, provided there is an agreement to do so in writing by the two parties. We previously clarified this point in TANF Policy Announcement TANF–ACF–PA–2004–01, dated December 1, 2004. This may include Healthy Marriage and Responsible Fatherhood providers in a State to meet any required non-Federal share. In the interest of clarity, we have added a paragraph discussing the counting of third-party expenditures towards the MOE requirement at § 263.2(e). This amendment does not reflect a change in policy.

Section 263.6 What kinds of expenditures do not count?

The Deficit Reduction Act of 2005 does not change the prohibition at section 409(a)(7)(B)(iv)(IV) of the Act. Under this prohibition, States may not count expenditures made ''as a condition of receiving Federal funds *other than under this part*'' toward its TANF MOE requirement. However, paragraph (c) of our original rule does not accurately reflect this provision, as it stipulates that ''Expenditures that a state makes as a condition of receiving Federal funds under *another* program * * *'' may not count toward the State's MOE requirement. Therefore, we have corrected paragraph (c) to say that the prohibition applies to expenditures that a State makes as a condition of receiving Federal funds under another program that is not in Part IV–A of the Act. This should avoid any misunderstanding and ensure that States know that they may count the non-Federal share of expenditures on allowable activities under the healthy marriage promotion or promoting responsible fatherhood programs in sections 403(a)(2)(A)(iii) or 403(a)(2)(C)(ii) of the Act.

Part 265—Data Collection and Reporting Requirements

Under the TANF program, States must meet a number of specific data reporting requirements. Some of these reporting requirements are explicit, primarily in section 411(a) of the Social Security Act, while others are implicit. For example, States are the source of information for reports that the Secretary must submit to Congress and also for the accountability provisions and determination of penalties.

These data requirements support two complementary purposes: (1) They provide information about the effectiveness and success of States in meeting the TANF purposes; and (2) they assure State accountability for key programmatic requirements. In particular, they ensure measurement of State performance in achieving the work participation rates in section 407 and other objectives of the Social Security Act.

These purposes can only be achieved if data are comparable across States and over time. Section 411(a)(7) of the Social Security Act permits the Secretary to prescribe such regulations as may be necessary to define the data elements required in the reports mandated by section 411(a). This is one of the few places in which the TANF law requires regulation by the Secretary and therefore reflects the importance of collecting comparable data.

The data requirements of section 411(a) reflect particular features of the program which are important for measuring the success of TANF. States have collected and reported similar data on the characteristics, financial circumstances, and assistance received by families for many years. These data enable Congress and the public to observe how changes in welfare policies affect the demographic characteristics and the financial circumstances of families receiving assistance, as well as the self-sufficiency services provided by States. Similar data facilitate comparisons across States and over time and promotes better understanding of what is happening nationwide—how States are assisting needy families; how they are promoting job preparation, work, and marriage; what is happening to out-of-wedlock birth trends among assisted families; and what kinds of support two-parent families are receiving.

Section 411(a)(1)(A)(xii) of the Act specifically requires States to report on ''information necessary to calculate participation rates under section 407.'' Given the significance of the work rates for achieving the objectives of TANF and for determining whether States face penalties, this is an area where accurate and timely measurement is particularly important.

Our primary goal in implementing the data collection and reporting requirements of the Act is to collect the data necessary to monitor program performance or required by statute. A secondary goal of this interim final rule is to give States clear guidance about what these requirements entail and the consequences of failing to meet the requirements. At the same time, however, we are sensitive to the issue of paperwork burden and are committed to minimizing the reporting burden on States, consistent with the TANF statutory framework.

As an aid to States, we will continue to support personal computer-based software packages to facilitate data entry and to create transmission files for each quarterly data report. These system supports also provide some edits to ensure data consistency. The transmission files use a standard file format for electronic submission to ACF. For the aggregated sections of the quarterly reports, we have created web-based reporting systems that permit easy access to States for adding and modifying their aggregated quarterly data reports on-line.

As discussed under the Paperwork Reduction Act of 1995 (PRA) provisions

of this preamble, we have submitted copies of this interim final rule and data reporting requirements to the Executive Office of Management and Budget (OMB) for its review of the information collection requirements. We encourage States, organizations, individuals, and others to submit comments regarding the information collection requirements to ACF (at the address above) and to the Office of Information and Regulatory Affairs, OMB, Room 3208, New Executive Office Building, Washington, DC 20503, ATTN: ACF/HHS Desk Officer. We will make necessary revisions in these instruments following the comment period and will issue them to States through the ACF policy issuance system.

The following discussion provides information on the changes we have made in part 265. We discuss the specific new data elements and the statutory authority for the new data elements.

Section 265.1 What does this part cover?

Paragraph (c) specifies the quarterly report that must be filed by States that claim MOE expenditures for separate State program(s). Under the prior TANF regulation, the quarterly report for separate State programs was required only if a State wanted to qualify for a caseload reduction credit or receive a high performance bonus. Now, this report is mandatory as required by section 411(a)(1)(A) of the Act as modified by the Deficit Reduction Act of 2005. We discuss this report and the specific data elements in the report more fully in § 265.3 below.

Section 265.2 What definitions apply to this part?

In addition to the definition contained in this provision, the data collection and reporting regulations rely on the general TANF definitions in §§ 260.30 through 33 and the definitions of a work-eligible individual and the work activities in § 261.2.

Section 265.3 What reports must the State file on a quarterly basis?

Each State must file two reports on a quarterly basis—the TANF Data Report and the TANF Financial Report. Also, each State that claims MOE expenditures for a separate State program(s) must file an additional report on a quarterly basis—the SSP–MOE Data Report.

Under prior TANF regulations, we discussed the statutory authorities for the TANF Data Report data elements that States will continue to collect. Below, we discuss the statutory authorities for all newly required data elements of the TANF Data Report. However, for ease of understanding, we have included § 265.3 in the interim rule in its entirety.

Section 265.3(b)(1) TANF Data Report: Disaggregated Data—Section One

Paragraph (b)(1) of this section requires that each State file the disaggregated case record information, as specified in section 411(a) of the Act, on families receiving TANF assistance.

The information we require to be collected is, for the most part, the same information that was collected under the prior TANF regulations. However, we have made several changes to the prior data collection instrument. We added a data element to identify work-eligible individuals for calculating the work participation rates. The statutory authority for the new data element comes from Sections 407(i) and 411(a)(1)(A)(xii) of the Social Security Act. We modified the definition of a two-parent family for work participation rate purposes and the instructions to the data element, Type of Family for Work Participation, to reflect the work-eligible individual concept. As clarification, we have also included the definitions of each work activity as defined at § 261.2.

Section 265.3(b)(4) TANF Data Report: Aggregated Data—Section Four

Paragraph (b)(4) of this section requires that each State that opts to report data for sections one and/or two based on a stratified sample must file quarterly aggregated caseload data by stratum for each month of the quarter. We did not explicitly regulate on submitting section four of the TANF Data Report under prior TANF regulation. However, it was implicit in prior TANF regulations as we did require States to follow the procedures in the TANF Sampling Manual in reporting data based on samples. The TANF Sampling Manual required States that used stratified sampling to report the information in section four of the TANF Data Report. Section four of the TANF Data Report was issued on January 19, 2000 in TANF–ACF–PI–2000–1 along with the TANF Sampling Manual. The only change we are making to section four is one additional code to designate whether the caseload data for a stratum is for section one or for section two of the TANF Data Report.

Section 265.3(d) SSP–MOE Data Report

Paragraph (d) requires a State that claims MOE expenditures for a separate State program(s) to report case record data on separate MOE programs. This implements the Deficit Reduction Act of 2005 changes to section 411(a)(1)(A) of the Act.

The data elements we are requiring States to collect on separate State programs are identical in content to, but fewer in number than the demographic and work activity data we are requiring in paragraph (b) of this section and are unchanged except as explained under the revised individual SSP–MOE Data Report sections below.

Section 265.3(d)(1) SSP–MOE Data Report: Disaggregated Data—Section One

Paragraph (d)(1) requires that each State that claims MOE expenditures for a separate State program(s) file the disaggregated case record information, as specified in section 411(a) of the Act, on families receiving SSP–MOE assistance.

Generally, the information we require to be reported is the same information that was collected under the prior TANF regulations. There are several changes to the prior data collection instrument. We have added a data element to identify work-eligible individuals for calculating the work participation rates. The statutory authority for the new data element comes from sections 407(i) and 411(a)(1)(A)(xii) of the Social Security Act. We modified the definition of a two-parent family for work participation rate purposes and the instructions to the data element, Type of Family for Work Participation, to reflect the work-eligible individual concept. As clarification, we have also included the definitions of each work activity as defined at § 261.2.

Section 265.3(d)(2) SSP–MOE Data Report: Disaggregated Data—Section Two

Paragraph (d)(2) of this section requires that each State that claims MOE expenditures for a separate State program(s) file the disaggregated case record information, as specified in section 411(a) of the Act, on families no longer receiving SSP–MOE assistance.

The second section of the SSP–MOE Data Report contains 28 data elements applicable to families no longer receiving assistance. The data elements in section two are identical to those in section one and are unchanged from the data elements collected in this section under prior TANF regulations.

Section 265.3(d)(3) SSP–MOE Data Report: Aggregated Data—Section Three

Paragraph (d)(3) of this section requires that each State that claims MOE expenditures for a separate State program(s) file quarterly aggregated information.

This third section of the SSP–MOE Data Report contains twelve data elements. These data elements are unchanged from what we collected under prior TANF regulations.

Section 265.3(d)(4) SSP–MOE Data Report: Aggregated Data—Section Four

Paragraph (d)(4) of this section requires that each State that claims MOE expenditures for a separate State program(s) and that opts to report data for sections one and/or two of the SSP–MOE Data Report based on a stratified sample file quarterly aggregated caseload data by stratum for each month in the quarter. We did not explicitly regulate on submitting section four of the SSP–MOE Data Report under prior TANF regulation. However, it was implicit in prior regulations as we did require States to follow the procedures in the TANF Sampling Manual in reporting data based on samples. The TANF Sampling Manual required States that used stratified sampling to report the information in section four of the SSP–MOE Data Report. Section four of the SSP–MOE Data Report was issued on January 19, 2000 in TANF–ACF–PI–2000–1 along with the TANF Sampling Manual. The only change to section four is one additional code to designate whether the caseload data for a stratum is for section one or for section two of the SSP–MOE Data Report.

Section 265.4 When are quarterly reports due?

For States that claim MOE expenditures for separate State program(s), revised paragraph (b) of this section implements section 409(a)(2) of the Act which requires that States file quarterly reports within 45 days following the end of the fiscal quarter or be subject to a penalty. Under the prior regulations, the quarterly SSP–MOE Data Report was required only if a State wanted to qualify for a caseload reduction credit or receive a high performance bonus. Under the Deficit Reduction Act of 2005, section 411(a)(1)(A) of the Social Security Act now requires that States report quarterly on their separate State program(s) for which they claim MOE expenditures.

Section 265.8 Under what circumstances will a State be subject to a reporting penalty for failure to submit quarterly reports?

Under the interim final rule, the SSP–MOE Data Report is now included as a required quarterly report. Failure to submit this report by the due dates may subject the State to a reporting penalty as required by section 409(a)(2) of the Act and revised section 411(a)(1)(A) of the Act. This change is reflected in § 265.8(a)(1) and § 265.8(b). We also changed this section to remove the penalty trigger previously located at § 265.8(c) if a State fails to include the definitions of work activities in its annual report. This information is now required as part of the Work Verification Plan. For ease of understanding, we have included the revised section in its entirety.

IV. Paperwork Reduction Act

This rule contains information collection requirements that have been submitted to the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995 (PRA). Under this Act, no persons are required to respond to a collection of information unless it displays a valid OMB control number. If you have any comments on these information collection requirements, please submit them to OMB within 30 days. The address is: Office of Management and Budget, Paperwork Reduction Project, 725 17th Street, NW., Washington, DC 20503, Attn: ACF/HHS Desk Officer.

This interim final rule imposes some new requirements and modifies others. They are:

- A new requirement that States establish documentation, verification and internal control procedures to ensure valid work participation rates, based on regulatory specifications. States will be required to submit the procedures to HHS no later than September 30, 2006. We will review the procedures and approve them if they meet the requirements. If the procedures fail to address or meet the requirements, States will be given 60 days to revise and correct them. If a State fails to establish, submit, or correct the procedures within specified timeframes, the State will be liable for a full five percent penalty for the year.
- A modification and reduction in burden of the caseload reduction credit information collection based on the recalibration of the caseload reduction credit.
- A modification of the reasonable cause/corrective compliance information collection burden based on the requirements of the participation rate verification procedures.
- A modification of the TANF Data Report and the SSP–MOE Data Report based on how we define work-eligible individuals, especially with regard to child-only cases.

The estimated burdens for these data collections (existing burden plus additional burden) are:

Instrument or requirement	Number of respondents	Yearly submittals	Average burden hours per response	Total burden hours	Original total burden hours
Preparation and Submission of Data Verification Procedures—§§ 261.60–261.63.	54	1	640	34,560	Not Applicable.
Caseload Reduction Documentation Process, ACF–202—§§ 261.41 & 261.44.	54	1	120	6,480	8,640.
Reasonable Cause/Corrective Compliance Documentation Process—§§ 262.4, 262.6, & 262.7; § 261.51.	54	2	240	25,920	17,280.
TANF Data Report—Part 265	54	4	2,193	473,688	465,169.
SSP–MOE Data Report—Part 265	29	4	714	82,824	78,213.

We are submitting this information collection to OMB for approval. These requirements will not become effective until approved by OMB. Copies of the proposed collection may be obtained by writing to the Administration for Children and Families, Office of Administration, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer. All requests should be identified by the title of the information collection. E-mail address: *rsargis@acf.hhs.gov* Written comments to OMB for the information collection should be sent directly to: Office of Management and Budget, Paperwork Reduction Project, 725 17th Street, NW., Washington, DC 20503, Attn: Desk Officer for the Administration for Children and Families.

V. Regulatory Flexibility Analysis

The Secretary certifies, under 5 U.S.C. 605(b), as enacted by the Regulatory Flexibility Act (Pub. L. 96–354), that this interim final rule will not result in

a significant impact on a substantial number of small entities. The primary impact of these rules is on State governments and on the operation of the Federal Government. Neither is considered a small entity under the Regulatory Flexibility Act.

In developing this interim final rule, we sought to implement the new requirements of the Deficit Reduction Act of 2005 in a way that does not impinge on a State's ability to design effective and responsive programs. At the same time, we sought to address concerns about inconsistency of work measures among States and to focus renewed attention on strengthening efforts to help more low-income families enter the workforce and succeed at work. We considered alternatives along the spectrum of these goals and believe the policies adopted in this interim final rule achieve a balance between the aims of the DRA to improve effectiveness of the program and preserving States' ability to continue using creativity and ingenuity to help families succeed under the TANF work goals and objectives. The balance we strove to attain encompassed such issues as: how to count and verify allowable work activities; who is a work-eligible individual; and how to ensure that State internal control procedures will result in accurate and consistent work participation information.

In determining how to count and verify allowable work activities, we considered establishing a single documentation standard in which States would verify an individual's participation in work activities each day. We rejected this alternative as excessive and cumbersome for States to implement; moreover we feared it might discourage employers from hiring TANF recipients, thus undermining the program. Instead, as we describe above, we chose a set of guidelines that allows variation in documentation by the type of work activity in question. Not only does this let a State tailor its documentation procedures to the nature of the activity, but also it approximates the standards in the working world.

With regard to the definition of a work-eligible individual, we considered a range of alternatives looking at each type of family in which a parent resides with a child recipient of assistance to determine whether it was appropriate to include that group of families in the calculation of the work participation rates. As we examined each of these types of families, we considered the ability of each to work and sought to balance this ability to work with the need for consistent work participation rates as envisioned under the Deficit Reduction Act and State flexibility.

As an alternative to our regulatory approach to monitoring State internal control procedures for verifying work participation information, we considered developing a system in which we would regularly draw one or more samples of cases and validate critical data needed to calculate the work participation rates, using an error percentage as a means of determining whether a State might be liable for a work verification penalty. Ultimately, we decided this alternative would be too burdensome, reminiscent of quality control systems of the past. We determined that the best approach was to describe in detail what we expect States to include in the Work Verification Plan and then to use the existing audit process as the principal means of assessing the accuracy of work participation data. We discuss this approach to regulating in greater detail throughout the preamble to these rules.

VI. Regulatory Impact Analysis

Executive Order 12866 requires that regulations be reviewed to ensure that they are consistent with the priorities and principles set forth in the Executive Order. The Department has determined that this interim final rule is consistent with these priorities and principles. These regulations primarily implement statutory changes to TANF included in the Deficit Reduction Act of 2005.

VII. Unfunded Mandates Reform Act of 1995

Section 202 of the Unfunded Mandates Reform Act of 1995 requires that a covered agency prepare a budgetary impact statement before promulgating a rule that includes any Federal mandate that may result in the expenditure by State, local, and Tribal governments, in the aggregate, or by the private sector, of $100 million or more in any one year.

If an agency must prepare a budgetary impact statement, section 205 requires that it select the most cost-effective and least burdensome alternative that achieves the objectives of the rule consistent with the statutory requirements. Section 203 requires a plan for informing and advising any small government that may be significantly or uniquely impacted.

The Department has determined that this interim final rule, in implementing the new statutory requirements, would not impose a mandate that will result in the expenditure by State, local, and tribal governments, in the aggregate, or by the private sector, of more than $100 million in any one year. In enacting the provisions of the Deficit Reduction Act, the Congress maintained the basic funding structure and flexibility of the TANF program. Over each of the next five years, the TANF block grant will provide States with $16.5 billion in Federal funds and a total of over $27 billion annually when including State Maintenance of Effort (MOE) funding. With the continued commitment of full funding for TANF, along with $2.1 billion in reported unobligated TANF balances at the end of FY 2005, States will have the resources to successfully meet the requirements of the Deficit Reduction Act. The funding level for States remains fixed and is based on historic levels of welfare spending when states used to serve a cash-dependent welfare caseload of more than twice its current size. States retain significant flexibility in the use of their TANF dollars to design their programs and have wide flexibility to determine eligibility criteria, benefit levels and the type of services and benefits available to TANF recipients.

In addition, over five years (FYs 2007–2011), the Department estimates that the States will pay penalties of $51 million due to failure to meet work requirements. In general, our estimate assumes that most States will meet the work participation rates, because States retain considerable programmatic flexibility, along with increased motivation to develop a stronger focus on moving people to work and more accurate reporting systems. For those States that fail to meet work participation requirements, we do not anticipate assessing penalties until FY 2009. Once penalty liability is identified States will have an opportunity to correct the problem prior to the assessment of a penalty. We estimate issuing penalties amounting to $7 million in FY 2009, $16 million in FY 2010 and $28 million in FY 2011. Our estimated penalty assessment level increases during this period, in part, because the penalty percentage rate is progressive. Accordingly, we have not prepared a budgetary impact statement or prepared a plan for informing impacted small governments.

VIII. Congressional Review

This regulation is not a major rule as defined in 5 U.S.C. Chapter 8.

IX. Assessment of Federal Regulation and Policies on Families

Section 654 of the Treasury and General Government Appropriations Act of 1999 requires Federal agencies to determine whether a proposed policy or regulation may negatively affect family well being. If the agency's determination

is affirmative, then the agency must prepare an impact assessment addressing seven criteria specified in the law. The Department has conducted a Family Policymaking Assessment in accordance with this requirement and determined that these regulations will not have a negative impact on family well being as defined in the legislation.

X. Executive Order 13132

Executive Order 13132, Federalism, requires that Federal agencies consult with State and local government officials in the development of regulatory policies with federalism implications. Consistent with Executive Order 13132, we specifically solicit comment from State and local government officials on this interim final rule. We will seriously consider these comments in developing the final rule.

List of Subjects

45 CFR Parts 261 and 262

Administrative practice and procedure, Day care, Employment, Grant programs-social programs, Penalties, Public assistance programs, Reporting and recordkeeping requirements, Vocational education.

45 CFR Part 263

Administrative practice and procedure, Day care, Employment, Grant programs-social programs, Loan programs-social programs, Penalties, Public assistance programs.

45 CFR Part 265

Administrative practice and procedure, Day care, Employment, Grant programs-social programs, Penalties, Public assistance programs, Reporting and recordkeeping requirements.

Dated: March 23, 2006.

Wade F. Horn,

Assistant Secretary for Children and Families.

Approved: May 25, 2006.

Michael O. Leavitt,

Secretary of Health and Human Services.

For the reasons stated in the preamble, we are amending 45 CFR chapter II by revising part 261, part 262, part 263, and part 265 as set forth below:

■ 1. The authority citation for part 261 is revised to read as follows:

Authority: 42 U.S.C. 601, 602, 607, and 609; Pub. L. 109–171.

■ 2. Revise § 261.1 to read as follows:

§ 261.1 What does this part cover?

This part includes the regulatory provisions relating to the mandatory work requirements of TANF and State work participation data verification requirements.

■ 3. Revise § 261.2 to read as follows:

§ 261.2 What definitions apply to this part?

(a) The general TANF definitions at §§ 260.30 through 260.33 of this chapter apply to this part.

(b) *Unsubsidized employment* means full-or part-time employment in the public or private sector that is not subsidized by TANF or any other public program.

(c) *Subsidized private sector employment* means employment in the private sector for which the employer receives a subsidy from TANF or other public funds to offset some or all of the wages and costs of employing a recipient.

(d) *Subsidized public sector employment* means employment in the public sector for which the employer receives a subsidy from TANF or other public funds to offset some or all of the wages and costs of employing a recipient.

(e) *Work experience (including work associated with the refurbishing of publicly assisted housing) if sufficient private sector employment is not available* means a work activity, performed in return for welfare, that provides an individual with an opportunity to acquire the general skills, training, knowledge, and work habits necessary to obtain employment. The purpose of work experience is to improve the employability of those who cannot find unsubsidized employment. This activity must be supervised by an employer, work site sponsor, or other responsible party on an ongoing basis no less frequently than daily.

(f) *On-the-job training* means training in the public or private sector that is given to a paid employee while he or she is engaged in productive work and that provides knowledge and skills essential to the full and adequate performance of the job. On-the-job training must be supervised by an employer, work site sponsor, or other responsible party on an ongoing basis no less frequently than daily.

(g) *Job search and job readiness assistance* means the act of seeking or obtaining employment, preparation to seek or obtain employment, including life skills training, and substance abuse treatment, mental health treatment, or rehabilitation activities for those who are otherwise employable. Such treatment or therapy must be determined to be necessary and certified by a qualified medical or mental health professional. Job search and job readiness assistance activities must be supervised by the TANF agency or other responsible party on an ongoing basis no less frequently than daily.

(h) *Community service programs* mean structured programs and embedded activities in which TANF recipients perform work for the direct benefit of the community under the auspices of public or nonprofit organizations. Community service programs must be limited to projects that serve a useful community purpose in fields such as health, social service, environmental protection, education, urban and rural redevelopment, welfare, recreation, public facilities, public safety, and child care. Community service programs are designed to improve the employability of recipients not otherwise able to obtain employment, and must be supervised on an ongoing basis no less frequently than daily. A State agency shall take into account, to the extent possible, the prior training, experience, and skills of a recipient in making appropriate community service assignments.

(i) *Vocational educational training (not to exceed 12 months with respect to any individual)* means organized educational programs that are directly related to the preparation of individuals for employment in current or emerging occupations requiring training other than a baccalaureate or advanced degree. Vocational educational training must be supervised on an ongoing basis no less frequently than daily.

(j) *Job skills training directly related to employment* means training or education for job skills required by an employer to provide an individual with the ability to obtain employment or to advance or adapt to the changing demands of the workplace. Job skills training directly related to employment must be supervised on an ongoing basis no less frequently than daily.

(k) *Education directly related to employment, in the case of a recipient who has not received a high school diploma or a certificate of high school equivalency* means education related to a specific occupation, job, or job offer. Education directly related to employment must be supervised on an ongoing basis no less frequently than daily.

(l) *Satisfactory school attendance at secondary school or in a course of study leading to a certificate of general equivalence, in the case of a recipient who has not completed secondary school or received such a certificate* means regular attendance, in accordance with the requirements of the secondary school or course of study, at a secondary school or in a course of study leading to a certificate of general equivalence, in

the case of a recipient who has not completed secondary school or received such a certificate. This activity must be supervised on an ongoing basis no less frequently than daily.

(m) *Providing child care services to an individual who is participating in a community service program* means providing child care to enable another TANF recipient to participate in a community service program. This activity must be supervised on an ongoing basis no less frequently than daily.

(n)(1) *Work-eligible individual* means an adult (or minor child head-of-household) receiving assistance under TANF or a separate State program or a non-recipient parent living with a child receiving such assistance unless the parent is:

(i) A minor parent and not the head-of-household or spouse of the head-of-household;

(ii) An alien who is ineligible to receive assistance due to his or her immigration status; or

(iii) At State option on a case-by-case basis, a recipient of Supplemental Security Income (SSI) benefits.

(2) The term also excludes:

(i) A parent providing care for a disabled family member living in the home who does not attend school on a full-time basis, provided that the need for such care is supported by medical documentation; and

(ii) An individual in a family receiving MOE-funded assistance under an approved Tribal TANF program, unless the State includes the Tribal family in calculating work participation rates, as permitted under section 261.25.

■ 4. Revise Subpart B to read as follows:

Subpart B—What Are the Provisions Addressing State Accountability?

Sec.

261.20 How will we hold a State accountable for achieving the work objectives of TANF?
261.21 What overall work rate must a State meet?
261.22 How will we determine a State's overall work rate?
261.23 What two-parent work rate must a State meet?
261.24 How will we determine a State's two-parent work rate?
261.25 Does a State include Tribal families in calculating these rates?

§ 261.20 How will we hold a State accountable for achieving the work objectives of TANF?

(a) Each State must meet two separate work participation rates in FY 2006 and thereafter, one—the two-parent rate based on how well it succeeds in helping work-eligible individuals in two-parent families find work activities described at § 261.30, the other—the overall rate based on how well it succeeds in finding those activities for work-eligible individuals in all the families that it serves.

(b) Each State must submit data, as specified at § 265.3 of this chapter, that allows us to measure its success in requiring work-eligible individuals to participate in work activities.

(c) If the data show that a State met both participation rates in a fiscal year, then the percentage of historic State expenditures that it must expend under TANF, pursuant to § 263.1 of this chapter, decreases from 80 percent to 75 percent for that fiscal year. This is also known as the State's TANF ''maintenance-of-effort'' (MOE) requirement.

(d) If the data show that a State did not meet a minimum work participation rate for a fiscal year, a State could be subject to a financial penalty.

(e) Before we impose a penalty, a State will have the opportunity to claim reasonable cause or enter into a corrective compliance plan, pursuant to §§ 262.5 and 262.6 of this chapter.

§ 261.21 What overall work rate must a State meet?

Each State must achieve a 50 percent minimum overall participation rate in FY 2006 and thereafter, minus any caseload reduction credit to which it is entitled as provided in subpart D of this part.

§ 261.22 How will we determine a State's overall work rate?

(a)(1) The overall participation rate for a fiscal year is the average of the State's overall participation rates for each month in the fiscal year.

(2) The rate applies to families with a work-eligible individual.

(b) We determine a State's overall participation rate for a month as follows:

(1) The number of TANF and SSP–MOE families that include a work-eligible individual who meet the requirements set forth in § 261.31 for the month (*i.e.*, the numerator), divided by,

(2) The number of TANF and SSP–MOE families that include a work-eligible individual, minus the number of such families that are subject to a penalty for refusing to work in that month (*i.e.*, the denominator). However, if a family with a work-eligible individual has been penalized for refusal to participate in work activities for more than three of the last 12 months, we will not exclude it from the participation rate calculation.

(3) At State option, we will include in the participation rate calculation families with a work-eligible individual that have been penalized for refusing to work no more than three of the last 12 months.

(c)(1) A State has the option of not requiring a single custodial parent caring for a child under age one to engage in work.

(2) At State option, we will disregard a family with such a parent from the participation rate calculation for a maximum of 12 months.

(d)(1) If a family receives assistance for only part of a month, we will count it as a month of participation if a work-eligible individual is engaged in work for the minimum average number of hours in each full week that the family receives assistance in that month.

(2) If a State pays benefits retroactively (*i.e.*, for the period between application and approval of benefits), it has the option to consider the family to be receiving assistance during the period of retroactivity.

§ 261.23 What two-parent work rate must a State meet?

Each State must achieve a 90 percent minimum two-parent participation rate in FY 2006 and thereafter, minus any caseload reduction credit to which it is entitled as provided in subpart D of this part.

§ 261.24 How will we determine a State's two-parent work rate?

(a)(1) The two-parent participation rate for a fiscal year is the average of the State's two-parent participation rates for each month in the fiscal year.

(2) The rate applies to two-parent families with two work-eligible individuals. However, if one of the parents is a disabled work-eligible individual, we will not consider the family to be a two-parent family; *i.e.*, we will not include such a family in either the numerator or denominator of the two-parent rate.

(b) We determine a State's two-parent participation rate for the month as follows:

(1) The number of two-parent TANF and SSP–MOE families in which both parents are work-eligible individuals and together they meet the requirements set forth in § 261.32 for the month (*i.e.*, the numerator), divided by,

(2) The number of two-parent TANF and SSP–MOE families in which both parents are work-eligible individuals during the month, minus the number of such two-parent families that are subject to a penalty for refusing to work in that month (the denominator). However, if a family with a work-eligible individual has been penalized for more than three months of the last 12 months, we will

not exclude it from the participation rate calculation.

(3) At State option, we will include in the participation rate calculation families with a work-eligible individual that have been penalized for refusing to work no more than three of the last 12 months.

(c) For purposes of the calculation in paragraph (b) of this section, a two-parent family includes, at a minimum, all families with two natural or adoptive parents (of the same minor child) who are work-eligible individuals and living in the home, unless both are minors and neither is a head-of-household.

(d)(1) If the family receives assistance for only part of a month, we will count it as a month of participation if a work-eligible individual in the family (or both work-eligible individuals, if they are both required to work) is engaged in work for the minimum average number of hours in each full week that the family receives assistance in that month.

(2) If a State pays benefits retroactively (*i.e.*, for the period between application and approval of benefits), it has the option to consider the family to be receiving assistance during the period of retroactivity.

§ 261.25 Does a State include Tribal families in calculating the work participation rate?

At State option, we will include families with a work-eligible individual that are receiving assistance under an approved Tribal family assistance plan or under a Tribal work program in calculating the State's participation rates under §§ 261.22 and 261.24.

■ 5. Revise § 261.31 to read as follows:

§ 261.31 How many hours must a work-eligible individual participate for the family to count in the numerator of the overall rate?

(a) A work-eligible individual counts as engaged in work for a month for the overall rate if:

(1) He or she participates in work activities during the month for at least a minimum average of 30 hours per week; and

(2) At least 20 of the above hours per week come from participation in the activities listed in paragraph (b) of this section.

(b) The following nine activities count toward the first 20 hours of participation: Unsubsidized employment; subsidized private-sector employment; subsidized public-sector employment; work experience; on-the-job training; job search and job readiness assistance; community service programs; vocational educational training; and providing child care services to an individual who is participating in a community service program.

(c) Above 20 hours per week, the following three activities may also count as participation: Job skills training directly related to employment; education directly related to employment; and satisfactory attendance at secondary school or in a course of study leading to a certificate of general equivalence.

(d) We will consider a work-eligible individual who participates in a work experience or community service program for the maximum number of hours per week that a State may require by dividing the combined monthly TANF grant and food stamp allotment by the appropriate minimum wage under the minimum wage requirement of the Fair Labor Standards Act (FLSA) to have participated 20 hours per week if actual participation falls short of 20 hours per week. This policy is limited to States that have adopted a food stamp workfare program and a Simplified Food Stamp Program. For families that need additional hours beyond the core activity requirement, these hours must be satisfied in some other TANF work activity.

■ 6. Revise § 261.32 to read as follows:

§ 261.32 How many hours must work-eligible individuals participate for the family to count in the numerator of the two-parent rate?

(a) Subject to paragraph (d) of this section, a family with two work-eligible parents counts as engaged in work for the month for the two-parent rate if:

(1) Work-eligible parents in the family are participating in work activities for a combined average of at least 35 hours per week during the month, and

(2) At least 30 of the 35 hours per week come from participation in the activities listed in paragraph (b) of this section.

(b) The following nine activities count for the first 30 hours of participation: Unsubsidized employment; subsidized private-sector employment; subsidized public-sector employment; work experience; on-the-job training; job search and job readiness assistance; community service programs; vocational educational training; and providing child care services to an individual who is participating in a community service program.

(c) Above 30 hours per week, the following three activities may also count for participation: Job skills training directly related to employment; education directly related to employment; and satisfactory attendance at secondary school or in a course of study leading to a certificate of general equivalence.

(d) We will consider a family with two work-eligible parents in which one or both parents participate in a work experience or community service program for the maximum number of hours per week that a State may require by dividing their combined monthly TANF grant and food stamp allotment by the appropriate minimum wage under the minimum wage requirement of the Fair Labor Standards Act (FLSA) to have participated 30 hours per week if actual participation falls short of 30 hours per week. This policy is limited to States that have adopted a food stamp workfare program and a Simplified Food Stamp Program. For families that need additional hours beyond the core activity requirement, these hours must be satisfied in some other TANF work activity.

(e)(1) If the family receives federally funded child care assistance and an adult in the family is not disabled or caring for a severely disabled child, then the work-eligible individuals must be participating in work activities for an average of at least 55 hours per week to count as a two-parent family engaged in work for the month.

(2) At least 50 of the 55 hours per week must come from participation in the activities listed in paragraph (b) of this section.

(3) Above 50 hours per week, the three activities listed in paragraph (c) of this section may also count as participation.

(4) We will consider family with two work-eligible parents receiving federally funded child care in which one or both parents participate in a work experience or community service program for the maximum number of hours per week that a State may require by dividing their combined monthly TANF grant and food stamp allotment by the appropriate minimum wage under the minimum wage requirement of the Fair Labor Standards Act (FLSA) to have participated 50 hours per week if actual participation falls short of 50 hours per week. This policy is limited to States that have adopted a food stamp workfare program and a Simplified Food Stamp Program. For families that need additional hours beyond the core activity requirement, these hours must be satisfied in some other TANF work activity.

■ 7. Revise Subpart D to read as follows:

Subpart D—How Will We Determine Caseload Reduction Credit for Minimum Participation Rates?

Sec.

261.40 Is there a way for a State to reduce the work participation rates?
261.41 How will we determine the caseload reduction credit?
261.42 Which reductions count in determining the caseload reduction credit?
261.43 What is the definition of a ''case receiving assistance'' in calculating the caseload reduction credit?
261.44 When must a State report the required data on the caseload reduction credit?

§ 261.40 Is there a way for a State to reduce the work participation rates?

(a)(1) If the average monthly number of cases receiving assistance, including assistance under a separate State program (as provided at § 261.42(b)), in a State in the preceding fiscal year was lower than the average monthly number of cases that received assistance, including assistance under a separate State program in that State in FY 2005, the minimum overall participation rate the State must meet for the fiscal year (as provided at § 261.21) decreases by the number of percentage points the prior-year caseload fell in comparison to the FY 2005 caseload.

(2) The minimum two-parent participation rate the State must meet for the fiscal year (as provided at § 261.23) decreases, at State option, by either:

(i) The number of percentage points the prior-year two-parent caseload, including two-parent cases receiving assistance under a separate State program (as provided at § 261.42(b)), fell in comparison to the FY 2005 two-parent caseload, including two-parent cases receiving assistance under a separate State program; or

(ii) The number of percentage points the prior-year overall caseload, including assistance under a separate State program (as provided at § 261.42(b)), fell in comparison to the FY 2005 overall caseload, including cases receiving assistance under a separate State program.

(3) For the credit calculation, we will refer to the fiscal year that precedes the fiscal year to which the credit applies as the ''comparison year.''

(b)(1) The calculations in paragraph (a) of this section must disregard caseload reductions due to requirements of Federal law and to changes that a State has made in its eligibility criteria in comparison to its criteria in effect in FY 2005.

(2) At State option, the calculation may offset the disregard of caseload reductions in paragraph (b)(1) of this section by changes in eligibility criteria that increase caseloads.

(c)(1) To establish the caseload base for FY 2005 and to determine the comparison-year caseload, we will use the combined TANF and Separate State Program caseload figures reported on the Form ACF–199, TANF Data Report, and Form ACF–209, SSP–MOE Data Report, respectively.

(2) To qualify for a caseload reduction, a State must have reported monthly caseload information, including cases in separate State programs, for FY 2005 and the comparison year for cases receiving assistance as defined at § 261.43.

(d)(1) A State may correct erroneous data or submit accurate data to adjust program data or to include unduplicated cases within the fiscal year.

(2) We will adjust both the FY 2005 baseline and the comparison-year caseload information, as appropriate, based on these State submissions.

(e) We refer to the number of percentage points by which a caseload falls, disregarding the cases described in paragraph (b), as a caseload reduction credit.

§ 261.41 How will we determine the caseload reduction credit?

(a)(1) We will determine the overall and two-parent caseload reduction credits that apply to each State based on the information and estimates reported to us by the State on eligibility policy changes using application denials, case closures, or other administrative data sources and analyses.

(2) We will accept the information and estimates provided by a State, unless they are implausible based on the criteria listed in paragraph (d) of this section.

(3) We may conduct on-site reviews and inspect administrative records on applications, case closures, or other administrative data sources to validate the accuracy of the State estimates.

(b) In order to receive a caseload reduction credit, a State must submit a Caseload Reduction Report to us containing the following information:

(1) A listing of, and implementation dates for, all State and Federal eligibility changes, as defined at § 261.42, made by the State since the beginning of FY 2006;

(2) A numerical estimate of the positive or negative average monthly impact on the comparison-year caseload of each eligibility change (based, as appropriate, on application denials, case closures or other analyses);

(3) An overall estimate of the total net positive or negative impact on the applicable caseload as a result of all such eligibility changes;

(4) An estimate of the State's caseload reduction credit;

(5) A description of the methodology and the supporting data that a State used to calculate its caseload reduction estimates; and

(6) A certification that it has provided the public an appropriate opportunity to comment on the estimates and methodology, considered their comments, and incorporated all net reductions resulting from Federal and State eligibility changes.

(c)(1) A State requesting a caseload reduction credit for the overall participation rate must base its estimates of the impact of eligibility changes on decreases in its comparison-year overall caseload compared to the FY 2005 overall caseload baseline established in accordance with § 261.40(d).

(2) A State requesting a caseload reduction credit for its two-parent rate must base its estimates of the impact of eligibility changes on decreases in either:

(i) Its two-parent caseload compared to the FY 2005 comparison-year two-parent caseload baseline established in accordance with § 261.40(d); or

(ii) Its overall caseload compared to the FY 2005 comparison-year overall caseload baseline established in accordance with § 261.40(d).

(d)(1) For each State, we will assess the adequacy of information and estimates using the following criteria: its methodology; its estimates of impact compared to other States; the quality of its data; and the completeness and adequacy of its documentation.

(2) If we request additional information to develop or validate estimates, the State may negotiate an appropriate deadline or provide the information within 30 days of the date of our request.

(3) The State must provide sufficient data to document the information submitted under paragraph (b) of this section.

(e) We will not calculate a caseload reduction credit unless the State reports case-record data on individuals and families served by any separate State program, as required under § 265.3(d) of this chapter.

(f) A State may only apply to the participation rate a caseload reduction credit that we have calculated. If a State disagrees with the caseload reduction credit, it may appeal the decision as an adverse action in accordance with § 262.7 of this chapter.

§ 261.42 Which reductions count in determining the caseload reduction credit?

(a)(1) A State's caseload reduction credit must not include caseload decreases due to Federal requirements or State changes in eligibility rules since

FY 2005 that directly affect a family's eligibility for assistance.

(2) At State option, a State's caseload reduction credit may include caseload increases due to Federal requirements or State change in eligibility rules since FY 2005 if used to offset caseload decreases in paragraph (a)(1) of this section.

(3) A State may not receive a caseload reduction credit that exceeds the actual caseload decline between FY 2005 and the comparison year.

(4) A State may count the reductions attributable to enforcement mechanisms or procedural requirements that are used to enforce existing eligibility criteria (*e.g.*, fingerprinting or other verification techniques) to the extent that such mechanisms or requirements identify or deter families otherwise ineligible under existing rules.

(b) A State must include cases receiving assistance in separate State programs as part of its FY 2005 caseload and comparison-year caseload. However, if a State provides documentation that separate State program cases overlap with or duplicate cases in the TANF caseload, we will exclude them from the caseload count.

§ 261.43 What is the definition of a ''case receiving assistance'' in calculating the caseload reduction credit?

(a) The caseload reduction credit is based on decreases in caseloads receiving assistance (other than those excluded pursuant to § 261.42) both in a State's TANF program and in separate State programs that address basic needs and are used to meet the MOE requirement.

(b) A State that is investing State MOE funds in eligible families in excess of the required 80 percent or 75 percent basic MOE amount need only include the pro rata share of caseloads receiving assistance that is required to meet basic MOE requirements.

§ 261.44 When must a State report the required data on the caseload reduction credit?

A State must report the necessary documentation on caseload reductions for the preceding fiscal year by December 31.

Subpart F—[Redesignated as Subpart H]

■ 8. Redesignate Subpart F as subpart H.

§ 261.60 [Redesignated as § 261.80.]

■ 9. Redesignate § 261.60 as § 261.80.

■ 10. Add a new subpart F to read as follows:

Subpart F—How Do We Ensure the Accuracy of Work Participation Information?

Sec.

261.60 What methods may a State use to report a work-eligible individual's hours of participation?
261.61 How must a State document a work-eligible individual's hours of participation?
261.62 What must a State do to verify the accuracy of its work participation information?
261.63 When is the State's Work Verification Plan due?
261.64 How will we determine if the State is meeting the requirement to establish and maintain work verification procedures that ensure an accurate measurement of work participation?
261.65 Under what circumstances will we impose a work verification penalty for failure to submit a work verification plan or for failure to maintain adequate internal controls to ensure consistent measurement of the work participation rate?

§ 261.60 What methods may a State use to report a work-eligible individual's hours of participation?

(a) A State must report the actual hours that an individual participates in an activity, subject to the qualifications in paragraphs (b) and (c) and § 261.61(c). It is not sufficient to report the hours an individual is scheduled to participate in an activity.

(b) For the purposes of calculating the work participation rates, actual hours may include the hours for which an individual was paid, including paid holidays and sick leave. For participation in unpaid work activities, it may also include excused absences for hours missed due to holidays and a maximum of an additional 10 days of excused absences in any 12-month period, no more than two of which may occur in a month. In order to count an excused absence as actual hours of participation, the individual must have been scheduled to participate in an allowable work activity for the period of the absence that the State reports as participation. A State must describe its excused absence policies and definitions as part of its Work Verification Plan, specified at § 261.62.

(c) A State may not count more hours toward the participation rate for a self-employed individual than the number derived by dividing the individual's self-employment income (gross income less business expenses) by the Federal minimum wage. A State may propose an alternative method of determining self-employment hours as part of its Work Verification Plan.

§ 261.61 How must a State document a work-eligible individual's hours of participation?

(a) A State must support each individual's hours of participation through documentation in the case file. In accordance with § 261.62, a State must describe in its Work Verification Plan the documentation it uses to verify hours of participation in each activity.

(b) For an employed individual, the documentation may consist of, but is not limited to pay stubs, employer reports, or time and attendance records substantiating hours of participation. A State may presume that an employed individual participated in unsubsidized employment for the total number of hours for which that individual was paid.

(c) For unsubsidized employment, subsidized employment, and OJT, a State may report projected actual hours of employment participation for up to six months based on current, documented actual hours of work. Any time a State receives information that the client's actual hours of work have changed, or no later than the end of any six-month period, the State must re-verify the client's current actual average hours of work, and may report these projected actual hours of participation for another six-month period.

(d) For an individual who is not employed, the documentation for substantiating hours of participation may consist of, but is not limited to, time sheets, service provider attendance records, or school attendance records.

(e) For an individual who is self-employed, the documentation must comport with standards set forth in the State's approved Work Verification Plan. Self-reporting by a participant without additional verification is not sufficient documentation.

§ 261.62 What must a State do to verify the accuracy of its work participation information?

(a) To ensure accuracy in the reporting of work activities by work-eligible individuals on the TANF Data Report and, if applicable, the SSP–MOE Data Report, each State must:

(1) Establish and employ procedures for determining whether its work activities may count for participation rate purposes;

(2) Establish and employ procedures for determining how to count and verify reported hours of work;

(3) Establish and employ procedures for identifying who is a work-eligible individual;

(4) Establish and employ internal controls to ensure compliance with the procedures; and

(5) Submit to the Secretary for approval the State's Work Verification Plan in accordance with paragraph (b) of this section.

(b) A State's Work Verification Plan must include the following:

(1) For each countable work activity:

(i) A description demonstrating how the activity meets the relevant definition at § 261.2;

(ii) A description of how the State determines the number of countable hours of participation for self-employed individuals; and

(iii) A description of the documentation it uses to monitor participation and ensure that the actual hours of participation are reported;

(2) A description of the State's procedures for identifying all work-eligible individuals, as defined at § 261.2;

(3) A description of how the State ensures that, for each work-eligible individual, it:

(i) Accurately inputs data into the State's automated data processing system;

(ii) Properly tracks the hours though the automated data processing system; and

(iii) Accurately reports the hours to the Department;

(4) A description of the procedures for ensuring it does not transmit to the Department a work-eligible individual's hours of participation in an activity that does not meet a Federal definition of a countable work activity; and

(5) A description of the internal controls that the State has implemented to ensure a consistent measurement of the work participation rates, including the quality assurance processes and sampling specifications it uses to monitor adherence to the established work verification procedures by State staff, local staff, and contractors.

(c) We will review a State's Work Verification Plan for completeness and approve it if we believe that it will result in accurate reporting of work participation information.

§ 261.63 When is a State's Work Verification Plan Due?

(a) Each State must submit its interim Work Verification Plan for validating work activities reported in the TANF Data Report and, if applicable, the SSP–MOE Data Report no later than September 30, 2006.

(b) If HHS requires changes, a State must submit them within 60 days of receipt of our notice and include all necessary changes as part of a final approved Work Verification Plan no later than September 30, 2007.

(c) If a State modifies its verification procedures for TANF or SSP–MOE work activities or its internal controls for ensuring a consistent measurement of the work participation rate, the State must submit for approval an amended verification plan by the end of the quarter in which the State modifies the procedures or internal controls.

§ 261.64 How will we determine if the State is meeting the requirement to establish and maintain work verification procedures that ensure an accurate measurement of work participation?

(a) We will determine that a State has met the requirement to establish work verification procedures if it submits an interim Work Verification Plan by September 30, 2006 and a complete Work Verification Plan that we approve by September 30, 2007.

(b) A ''complete'' Work Verification Plan means that:

(1) The plan includes all the information required by § 261.62(b); and

(2) The State certifies that the plan includes all the information required by § 261.62(b) and that it accurately reflect the procedures under which the State is operating.

(c) For conduct occurring after October 1, 2007, we will use the single audit under OMB Circular A–133 in conjunction with other reviews, audits, and data sources, as appropriate, to assess the accuracy of the data filed by States for use in calculating the work participation rates.

§ 261.65 Under what circumstances will we impose a work verification penalty for failure to submit a work verification plan or for failure to maintain adequate procedures to ensure a consistent measurement of the work participation rate?

(a) We will take action to impose a penalty under § 262.1(a)(15) of this chapter if:

(1) The requirements under §§ 261.64(a) and (b) have not been met; or

(2) We determine that the State has not maintained adequate documentation, verification, or internal control procedures to ensure the accuracy of the data used in calculating the work participation rates.

(b) If a State fails to submit an interim or complete Work Verification Plan by the due dates in § 261.64(a), we will reduce the SFAG payable for the immediately succeeding fiscal year by five percent of the adjusted SFAG.

(c) If a State fails to maintain adequate internal controls to ensure a consistent measurement of work participation, we will reduce the adjusted SFAG by the following percentages for a fiscal year:

(1) One percent for the first year;

(2) Two percent for the second year;

(3) Three percent for the third year;

(4) Four percent for the fourth year; and

(5) Five percent for the fifth and subsequent years.

(d) If a State complies with the requirements in this subpart for two consecutive years, then any penalty imposed for subsequent failures will begin anew, as described in paragraph (c) of this section.

(e) If we take action to impose a penalty under §§ 261.64(b) or (c), we will reduce the SFAG payable for the immediately succeeding fiscal year.

PART 262—ACCOUNTABILITY PROVISIONS—GENERAL

■ 1. The authority citation for part 262 is revised to read as follows:

Authority: 31 U.S.C. 7501 *et seq.*; 42 U.S.C. 606, 609, and 610; Pub. L. 109–171.

■ 2. In § 262.1, revise paragraphs (a)(13) and paragraph (a)(14), add paragraph (a)(15), and revise paragraph (c) to read as follows:

§ 262.1 What penalties apply to States?

(a) * * *

(13) A penalty equal to the amount of the State's Welfare-to-Work formula grant for failure to meet its basic MOE requirement during a year in which it receives the formula grant;

(14) A penalty of not less than one percent and not more than five percent of the adjusted SFAG for failure to impose penalties properly against individuals who refuse to engage in required work in accordance with section 407 of the Act; and

(15) A penalty of not less than one percent and not more than five percent of the adjusted SFAG for failure to establish or comply with work participation verification procedures.

* * * * *

(c)(1) We will take the penalties specified in paragraphs (a)(1), (a)(2), and (a)(7) of this section by reducing the SFAG payable for the quarter that immediately follows our final decision.

(2) We will take the penalties specified in paragraphs (a)(3), (a)(4), (a)(5), (a)(6), (a)(8), (a)(9), (a)(10), (a)(11), (a)(12), (a)(13), (a)(14), and (a)(15) of this section by reducing the SFAG payable for the fiscal year that immediately follows our final decision.

* * * * *

■ 3. Amend § 262.2 by adding a new paragraph (d) as follows:

§ 262.2 When do the TANF penalty provisions apply?

* * * * *

(d) The penalty specified in § 262.1(a)(15) takes effect on October 1,

2006, for failure to establish work participation verification procedures and on October 1, 2007, for failure to comply with those procedures.

■ 4. Amend § 262.3 by revising paragraph (a)(1) to read as follows:

§ 262.3 How will we determine if a State is subject to a penalty?

(a)(1) We will use the single audit under OMB Circular A–133, in conjunction with other reviews, audits, and data sources, as appropriate, to determine if a State is subject to a penalty for misusing Federal TANF funds (§ 263.10 of this chapter), intentionally misusing Federal TANF funds (§ 263.12 of this chapter), failing to participate in IEVS (§ 264.10 of this chapter), failing to comply with paternity establishment and child support requirements (§ 264.31 of this chapter), failing to maintain assistance to an adult single custodial parent who cannot obtain child care for a child under 6 (§ 261.57 of this chapter), failing to reduce assistance to a recipient who refuses without good cause to work (§ 261.54 of this chapter), and after October 1, 2007 failing to comply with work participation verification procedures (§ 261.64 of this chapter).

* * * * *

■ 5. Amend § 262.6 by revising paragraphs (e) and (f) to read as follows:

§ 262.6 What happens if a State does not demonstrate reasonable cause?

* * * * *

(e) The corrective compliance plan must correct or discontinue the violation within the following time frames:

(1) For a penalty under §§ 262.1(a)(4), (a)(9), or (a)(15), by the end of the first fiscal year ending at least six months after our receipt of the corrective compliance plan; and

(2) For the remaining penalties, by a date the State proposes that reflects the minimum period necessary to achieve compliance.

(f) During the 60-day period following our receipt of the State's corrective compliance plan, we may request additional information and consult with the State on modifications to the plan including in the case of a penalty under § 262.1(a)(15), modifications to the State's work verification procedures and Work Verification Plan.

* * * * *

PART 263—EXPENDITURES OF STATE AND FEDERAL TANF FUNDS

■ 1. The authority section for Part 263 is revised to read as follows:

Authority: 42 U.S.C. 604, 607, 609, and 862a; Pub. L. 109–171.

■ 2. Revise § 263.2 to read as follows:

§ 263.2 What kinds of State expenditures count toward meeting a State's basic MOE expenditure requirement?

(a) Expenditures of State funds in TANF or separate State programs may count if they are made for the following types of benefits or services:

(1) Cash assistance, including the State's share of the assigned child support collection that is distributed to the family, and disregarded in determining eligibility for, and amount of the TANF assistance payment;

(2) Child care assistance (see § 263.3);

(3) Education activities designed to increase self-sufficiency, job training, and work (see § 263.4);

(4) Any other use of funds allowable under section 404(a)(1) of the Act including:

(i) Nonmedical treatment services for alcohol and drug abuse and some medical treatment services (provided that the State has not commingled its MOE funds with Federal TANF funds to pay for the services), if consistent with the goals at § 260.20 of this chapter; and

(ii) Pro-family activities that are consistent with the goals at §§ 260.20(c) or (d) of this chapter, but do not constitute ''assistance'' as defined in § 260.31(a) of this chapter; and

(5)(i) Administrative costs for activities listed in paragraphs (a)(1) through (a)(4) of this section, not to exceed 15 percent of the total amount of countable expenditures for the fiscal year.

(ii) Costs for information technology and computerization needed for tracking or monitoring required by or under part IV-A of the Act do not count towards the limit in paragraph (5)(i) of this section, even if they fall within the definition of ''administrative costs.''

(A) This exclusion covers the costs for salaries and benefits of staff who develop, maintain, support, or operate the portions of information technology or computer systems used for tracking and monitoring.

(B) It also covers the costs of contracts for the development, maintenance, support, or operation of those portions of information technology or computer systems used for tracking or monitoring.

(b) With the exception of paragraph (a)(4)(ii) of this section, the benefits or services listed under paragraph (a) of this section count only if they have been provided to or on behalf of eligible families. An ''eligible family'' as defined by the State, must:

(1) Be comprised of citizens or aliens who:

(i) Are eligible for TANF assistance;

(ii) Would be eligible for TANF assistance, but for the time limit on the receipt of federally funded assistance; or

(iii) Are lawfully present in the United States and would be eligible for assistance, but for the application of title IV of PRWORA;

(2) Include a child living with a custodial parent or other adult caretaker relative (or consist of a pregnant individual); and

(3) Be financially eligible according to the appropriate income and resource (when applicable) standards established by the State and contained in its TANF plan.

(c) Benefits or services listed under paragraph (a) of this section provided to a family that meets the criteria under paragraphs (b)(1) through (b)(3) of this section, but who became ineligible solely due to the time limitation given under § 264.1 of this chapter, may also count.

(d) Expenditures for the benefits or services listed under paragraph (a) of this section count whether or not the benefit or service meets the definition of assistance under § 260.31 of this chapter. Further, families that meet the criteria in paragraphs (b)(2) and (b)(3) of this section are considered to be eligible for TANF assistance for the purposes of paragraph (b)(1)(i) of this section.

(e) Expenditures for benefits or services listed under paragraph (a) of this section may include allowable costs borne by others in the State (e.g. local government), including cash donations from non-Federal third parties (e.g., a non-profit organization) and the value of third party in-kind contributions if:

(1) The expenditure is verifiable and meets all applicable requirements in 45 CFR 92.3 and 92.24;

(2) There is an agreement between the State and the other party allowing the State to count the expenditure toward its MOE requirement; and

(3) The State counts a cash donation only when it is actually spent.

(f)(1) The expenditures for benefits or services in State-funded programs listed under paragraph (a) of this section count only if they also meet the requirements of § 263.5.

(2) Expenditures that fall within the prohibitions in § 263.6 do not count.

(g) State funds used to meet the Healthy Marriage Promotion and Responsible Fatherhood Grant match requirement may count to meet the MOE requirement in § 263.1, provided the expenditure also meets all the other MOE requirements in this subpart.

■ 3. Revise § 263.6 to read as follows:

§ 263.6 What kinds of expenditures do not count?

The following kinds of expenditures do not count:

(a) Expenditures of funds that originated with the Federal government;

(b) State expenditures under the Medicaid program under title XIX of the Act;

(c) Expenditures that a State makes as a condition of receiving Federal funds under another program that is not in Part IV-A of the Act, except as provided in § 263.3;

(d) Expenditures that a State made in a prior fiscal year;

(e) Expenditures that a State uses to match Federal Welfare-to-Work funds provided under section 403(a)(5) of the Act; and

(f) Expenditures that a State makes in the TANF program to replace the reductions in the SFAG as a result of penalties, pursuant to § 264.50 of this chapter.

PART 265—DATA COLLECTION AND REPORTING REQUIREMENTS

■ 1. The authority citation for part 265 is revised to read as follows:

Authority: 42 U.S.C. 603, 605, 607, 609, 611, and 613; Pub. L. 109–171.

■ 2. Amend § 265.1 by revising paragraph (c) to read as follows:

§ 265.1 What does this part cover?

* * * * *

(c) If a State claims MOE expenditures under a separate State program(s), this part describes the case record information (disaggregated and aggregated) on individuals and families in the quarterly SSP–MOE Data Report that each State must file.

* * * * *

■ 3. Revise § 265.2 to read as follows:

§ 265.2 What definitions apply to this part?

(a) Except as provided in paragraph (b) of this section, the general TANF definitions at §§ 260.30 through 260.33 and the definitions of a work-eligible individual and the work activities in § 261.2 of this chapter apply to this part.

(b) For data collection and reporting purposes only, family means:

(1) All individuals receiving assistance as part of a family under the State's TANF or separate State program (including noncustodial parents, where required under § 265.5(g)); and

(2) The following additional persons living in the household, if not included under paragraph (b)(1) of this section:

(i) Parent(s) or caretaker relative(s) of any minor child receiving assistance;

(ii) Minor siblings of any child receiving assistance; and

(iii) Any person whose income or resources would be counted in determining the family's eligibility for or amount of assistance.

■ 4. Revise § 265.3 to read as follows:

§ 265.3 What reports must the State file on a quarterly basis?

(a) *Quarterly reports.* (1) Each State must collect on a monthly basis, and file on a quarterly basis, the data specified in the TANF Data Report and the TANF Financial Report (or, as applicable, the Territorial Financial Report).

(2) Each State that claims MOE expenditures for a separate State program(s) must collect on a monthly basis, and file on a quarterly basis, the data specified in the SSP–MOE Data Report.

(b) *TANF Data Report.* The TANF Data Report consists of four sections. Two sections contain disaggregated data elements and two sections contain aggregated data elements.

(1) *Disaggregated Data on Families Receiving TANF Assistance—Section one.* Each State must file disaggregated information on families receiving TANF assistance. This section specifies identifying and demographic data such as the individual's Social Security Number and information such as the amount of assistance received, educational level, employment status, work participation activities, citizenship status, and earned and unearned income. The data must be provided for both adults and children.

(2) *Disaggregated Data on Families No Longer Receiving TANF Assistance—Section two.* Each State must file disaggregated information on families no longer receiving TANF assistance. This section specifies the reasons for case closure and data similar to the data required in section one.

(3) *Aggregated Data—Section three.* Each State must file aggregated information on families receiving, applying for, and no longer receiving TANF assistance. This section of the TANF Data Report requires aggregate figures in such areas as: The number of applications received and their disposition; the number of recipient families, adult recipients, and child recipients; the number of births and out-of-wedlock births for families receiving TANF assistance; the number of noncustodial parents participating in work activities; and the number of closed cases.

(4) *Aggregated Caseload Data by Stratum—Section four.* Each State that opts to use a stratified sample to report the quarterly TANF disaggregated data must file the monthly caseload data by stratum for each month in the quarter.

(c) *The TANF Financial Report (or Territorial Financial Report).* (1) Each State must file quarterly expenditure data on the State's use of Federal TANF funds, State TANF expenditures, and State expenditures of MOE funds in separate State programs.

(2) If a State is expending Federal TANF funds received in prior fiscal years, it must file a separate quarterly TANF Financial Report (or, as applicable, Territorial Financial Report) for each fiscal year that provides information on the expenditures of that year's TANF funds.

(3) Territories must report their expenditure and other fiscal data on the Territorial Financial Report, as provided at § 264.85 of this chapter, in lieu of the TANF Financial Report.

(d) *SSP–MOE Data Report.* The SSP–MOE Data Report consists of four sections. Two sections contain disaggregated data elements and two sections contain aggregated data elements.

(1) *Disaggregated Data on Families Receiving SSP–MOE Assistance—Section one.* Each State that claims MOE expenditures for a separate State program(s) must file disaggregated information on families receiving SSP–MOE assistance. This section specifies identifying and demographic data such as the individual's Social Security Number, the amount of assistance received, educational level, employment status, work participation activities, citizenship status, and earned and unearned income. The data must be provided for both adults and children.

(2) *Disaggregated Data on Families No Longer Receiving SSP–MOE Assistance—Section two.* Each State that claims MOE expenditures for a separate State program(s) must file disaggregated information on families no longer receiving SSP–MOE assistance. This section specifies the reasons for case closure and data similar to the data required in section one.

(3) *Aggregated Data—Section three.* Each State that claims MOE expenditures for a separate State program(s) must file aggregated information on families receiving and no longer receiving SSP–MOE assistance. This section of the SSP–MOE Data Report requires aggregate figures in such areas as: The number of recipient families, adult recipients, and child recipients; the total amount of assistance for families receiving SSP–MOE assistance; the number of non-custodial parents participating in work activities; and the number of closed cases.

(4) *Aggregated Caseload Data by Stratum—Section four.* Each State that

claims MOE expenditures for a separate State program(s) and that opts to use a stratified sample to report the SSP–MOE quarterly disaggregated data must file the monthly caseload by stratum for each month in the quarter.

(e) *Optional data elements.* A State has the option not to report on some data elements for some individuals in the TANF Data Report and the SSP–MOE Data Report, as specified in the instructions to these reports.

(f) *Non-custodial parents.* A State must report information on a non-custodial parent (as defined in § 260.30 of this chapter) if the non-custodial parent:

(1) Is receiving assistance as defined in § 260.31 of this chapter;

(2) Is participating in work activities as defined in section 407(d) of the Act; or

(3) Has been designated by the State as a member of a family receiving assistance.

■ 5. Revise § 265.4 to read as follows:

§ 265.4 When are quarterly reports due?

(a) Each State must file the TANF Data Report and the TANF Financial Report (or, as applicable, the Territorial Financial Report) within 45 days following the end of the quarter or be subject to a penalty.

(b) Each State that claims MOE expenditures for a separate State program(s) must file the SSP–MOE Data Report within 45 days following the end of the quarter or be subject to a penalty.

(c) A State that fails to submit the reports within 45 days will be subject to a penalty unless the State files complete and accurate reports before the end of the fiscal quarter that immediately succeeds the quarter for which the reports were required to be submitted.

■ 6. Revise § 265.8 to read as follows:

§ 265.8 Under what circumstances will we take action to impose a reporting penalty for failure to submit quarterly and annual reports?

(a) We will take action to impose a reporting penalty under § 262.1(a)(3) of this chapter if:

(1) A State fails to file the quarterly TANF Data Report, the quarterly TANF Financial Report (or, as applicable, the Territorial Financial Report), or the quarterly SSP–MOE Data Report (if applicable) within 45 days of the end of the quarter;

(2) The disaggregated data in the TANF Data Report or the SSP–MOE Data Report are not accurate or a report does not include all the data required by section 411(a) of the Act (other than section 411(a)(1)(A)(xii) of the Act) or the nine additional elements necessary to carry out the data collection system requirements, including the social security number;

(3) The aggregated data elements in the TANF Data Report or the SSP–MOE Data Report required by section 411(a) of the Act are not accurate and the report does not include the data elements necessary to carry out the data collection system requirements and to verify and validate the disaggregated data;

(4) The TANF Financial Report (or, as applicable, the Territorial Financial Report) does not contain complete and accurate information on total expenditures and expenditures on administrative costs and transitional services; or

(5) The annual report under § 265.9 does not contain the description of transitional services provided by a State to families no longer receiving assistance due to employment.

(b) If we determine that a State meets one or more of the conditions set forth in paragraph (a) of this section, we will notify the State that we intend to reduce the SFAG payable for the immediately succeeding fiscal year.

(c) We will not impose the penalty at § 262.1(a)(3) of this chapter if the State files the complete and accurate quarterly report or the annual report before the end of the fiscal quarter that immediately succeeds the fiscal quarter for which the reports were required.

(d) If the State does not file all reports as provided under paragraph (a) of this section by the end of the immediately succeeding fiscal quarter, the penalty provisions of §§ 262.4 through 262.6 of this chapter will apply.

(e) Subject to paragraphs (a) through (c) of this section and §§ 262.4 through 262.6 of this chapter, for each quarter for which a State fails to meet the reporting requirements, we will reduce the SFAG payable by an amount equal to four percent of the adjusted SFAG (or a lesser amount if the State achieves substantial compliance under a corrective compliance plan).

[FR Doc. 06–5743 Filed 6–28–06; 8:45 am]

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Federal Register

Thursday,
June 29, 2006

Part V

The President

Proclamation 8032—Independence Day, 2006

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Presidential Documents

Title 3—

The President

Proclamation 8032 of June 26, 2006

Independence Day, 2006

By the President of the United States of America

A Proclamation

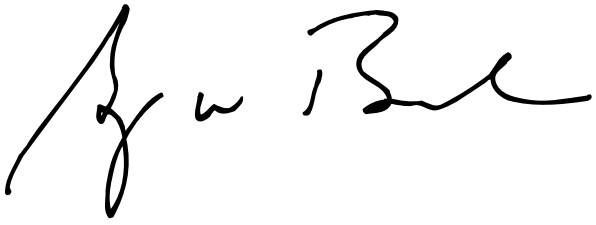
On July 4, 1776, our Nation's Founders declared ''That these United Colonies are, and of Right, ought to be free and Independent States.'' This declaration marked a great milestone in the history of human freedom. On the 230th anniversary of the signing of the Declaration of Independence, we pay tribute to the courage and dedication of those who created this country, and we celebrate the values of liberty and equality that make our country strong.

The patriots of the Revolutionary War acted on the beliefs that ''all men are created equal'' and ''that they are endowed by their Creator with certain unalienable Rights.'' By advancing these ideals, generations of Americans have unleashed the hope of freedom for people in every corner of the world.

As we celebrate our independence, Americans can take pride in our history and look to the future with confidence. We offer our gratitude to all the American patriots, past and present, who have sought to advance freedom and lay the foundations of peace. Because of their sacrifice, this country remains a beacon of hope for all who dream of liberty and a shining example to the world of what a free people can achieve. May God continue to bless the United States of America.

NOW, THEREFORE, I, GEORGE W. BUSH, President of the United States of America, by virtue of the authority vested in me by the Constitution and laws of the United States, do hereby proclaim July 4, 2006, as Independence Day. I call upon the people of the United States to observe with all due ceremony our Independence Day as a time to honor our Founders and their legacy of freedom and remember with thankfulness the sacrifice of our men and women in uniform.

IN WITNESS WHEREOF, I have hereunto set my hand this twenty-sixth day of June, in the year of our Lord two thousand six, and of the Independence of the United States of America the two hundred and thirtieth.



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LIST OF PUBLIC LAWS

This is a continuing list of public bills from the current session of Congress which have become Federal laws. It may be used in conjunction with "PLUS" (Public Laws Update Service) on 202–741–6043. This list is also available online at *http://www.archives.gov/federal-register/laws.html*.

The text of laws is not published in the **Federal Register** but may be ordered in "slip law" (individual pamphlet) form from the Superintendent of Documents, U.S. Government Printing Office, Washington, DC 20402 (phone, 202–512–1808). The text will also be made available on the Internet from GPO Access at *http://www.gpoaccess.gov/plaws/index.html*. Some laws may not yet be available.

S. 1445/P.L. 109–237

To designate the facility of the United States Postal Service located at 520 Colorado Avenue in Arriba, Colorado, as the "William H. Emery Post Office". (June 23, 2006; 120 Stat. 506)

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