unless the Part D appeals rules provide otherwise, the Part C appeals rules (including the annually adjusted AIC threshold amount) apply to Part D appeals to the extent they are appropriate. More specifically, § 423.1970 and § 423.1976 of the Part D appeals rules discuss the AIC threshold amounts for ALJ hearings and judicial review. Section 423.1970(a) grants a Part D enrollee, who is dissatisfied with the Independent Review Entity (IRE) reconsideration determination, a right to an ALJ hearing if the amount remaining in controversy after the IRE reconsideration meets the threshold amount established annually by the Secretary. Sections 423.1976(a) and (b) allow a Part D enrollee to request judicial review of an ALJ or MAC decision if, in part, the AIC meets the threshold amount established annually by the Secretary.

II. Annual AIC Adjustments

A. AIC Adjustment Formula and AIC Adjustments

As previously noted, section 940 of the MMA requires that the AIC threshold amounts be adjusted annually, beginning in January 2005, by the percentage increase in the medical care component of the consumer price index (CPI) for all urban consumers (U.S. city average) for July 2003 to the July of the preceding year involved and rounded to the nearest multiple of $10.

B. Calendar Year 2011

The AIC threshold amount for ALJ hearing requests will remain at $130 and the AIC threshold amount for judicial review will rise to $1,300 for the 2011 calendar year. These updated amounts are based on the 30.34 percent increase in the medical care component of the CPI from July of 2003 to July of 2010. The CPI level was at 297.6 in July of 2003 and rose to 387.898 in July of 2010. This change accounted for the 30.34 percent increase. The AIC threshold amount for ALJ hearing requests changes to $130.34 based on the 30.34 percent increase. In accordance with section 940 of the MMA, this amount is rounded to the nearest multiple of $10. Therefore, the 2011 AIC threshold amount for ALJ hearings is $130. The AIC threshold amount for judicial review changes to $1,303.42 based on the 30.34 percent increase. This amount was rounded to the nearest multiple of $10, resulting in a 2011 AIC threshold amount of $1,300.

C. Summary Table of Adjustments in the AIC Threshold Amounts

In Table 1 below, we list the (CY) 2005 through 2011 threshold amounts.

<table>
<thead>
<tr>
<th>TABLE 1—AMOUNT-IN-CONTROVERSY THRESHOLD AMOUNTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>ALJ Hearing .........................................................</td>
</tr>
<tr>
<td>Judicial Review .....................................................</td>
</tr>
</tbody>
</table>

* CY—Calendar Year.

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. 35).

(Catalog of Federal Domestic Assistance Program No. 93.778, Medical Assistance Program; No. 93.773 Medicare—Hospital Insurance Program; and No. 93.774, Medicare—Supplementary Medical Insurance Program)

Dated: September 2, 2010.

Donald M. Berwick,
Administrator, Centers for Medicare & Medicaid Services.

[FR Doc. 2010–23584 Filed 9–23–10; 8:45 am]
BILLING CODE 4120–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Subcommittee on Procedures Review, Advisory Board on Radiation and Worker Health (ABRWH), National Institute for Occupational Safety and Health (NIOSH)

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), the Centers for Disease Control and Prevention (CDC), announces the following meeting of the aforementioned subcommittee:

**Time and Date:** 9 a.m.–5 p.m., October 13, 2010.

**Place:** Cincinnati Airport Marriott, 2395 Progress Drive, Hebron, Kentucky 41018. Telephone (859) 334–4611, Fax (859) 334–4619.

**Status:** Open to the public, but without a public comment period. To access by conference call, dial the following information: (866) 659–0537, Participant Pass Code 9933701.

**Background:** The ABRWH was established under the Energy Employees Occupational Illness Compensation Program Act of 2000 to advise the President on a variety of policy and technical functions required to implement and effectively manage the compensation program. Key functions of the ABRWH include providing advice on the development of probability of causation guidelines that have been promulgated by the Department of Health and Human Services (HHS) as a final rule; advice on methods of dose reconstruction which have also been promulgated by HHS as a final rule; advice on the scientific validity and quality of dose estimation and reconstruction efforts being performed for purposes of the compensation program; and advice on petitions to add classes of workers to the Special Exposure Cohort (SEC).

In December 2000, the President delegated responsibility for funding, staffing, and operating the ABRWH to HHS, which subsequently delegated this authority to CDC. NIOSH implements this responsibility for CDC. The charter was issued on August 3, 2001, renewed at appropriate intervals, and will expire on August 3, 2011.

**Purpose:** The ABRWH is charged with (a) providing advice to the Secretary, HHS, on the development of guidelines under Executive Order 13179; (b) providing advice to the Secretary, HHS, on the scientific validity and quality of dose reconstruction efforts performed for this program; and (c) upon request by the Secretary, HHS, advising the Secretary on whether there is a class of employees at any Department of Energy facility who were exposed to radiation...
but for whom it is not feasible to estimate their radiation dose, and on
whether there is a reasonable likelihood that such radiation doses may have
endangered the health of members of this class. The Subcommittee on
Procedures Review was established to aid the ABRWH in carrying out its duty
to advise the Secretary, HHS, on dose reconstructions. The Subcommittee on
Procedures Review is responsible for overseeing, tracking, and participating in
the reviews of all procedures used in the dose reconstruction process by the
NIOSH Division of Compensation Analysis and Support (DCAS) and its
dose reconstruction contractor.

Matters To Be Discussed: The agenda for the Subcommittee meeting includes:
Review of draft prototype documents for informing the public on completed
Subcommittee procedure reviews; discussion of the following ORAU &
OCAS procedures: PER–012 ("Evaluating of Highly Insoluble Plutonium
Compounds"), PER–009 ("Target Organs for Lymphoma"), OCAS
TIB–0013 ("Special External Dose Reconstruction Considerations for
Mallinckrodt Workers"), OTIB–014 ("Rocky Flats Internal Dosimetry Co-
Worker Extension"), OTIB–019 ("Analysis of Co-worker Bioassay Data for
Internal Dose Assignment"), OTIB–0029 ("Internal Dosimetry Co-worker
Data for Y–12"), OTIB–0049 ("Calculating Doses for Plutonium
Strongly Retained in the Lungs"), OTIB–0047 ("External Radiation Monitoring at
the Y–12 Facility During the 1948–1949 Period"), OTIB–0051 ("Effect of
Threshold Energy and Angular Response of NTA Film on Missed
Neutron Dose at the Oak Ridge Y–12 Facility"), OTIB–0052 ("Parameters to
Consider When Processing Claims for Construction Trade Workers"), OTIB–
0054 ("Fission and Activation Product Assignment for Internal Dose-Related
Good Betas and Gross Gamma Analyses"), OTIB–0057 ("External
Radiation Dose Estimates For Individuals Near the 1958 Criticality
Accident at the Oak Ridge Y–12 Plant"), OTIB–0070 ("Dose Reconstruction
During Residual Radioactivity Periods at Atomic Weapons Employer Facilities"),
and TBD 6000 ("Site Profile for Atomic Weapons Employers that Worked
Uranium and Thorium Metals"); and a continuation of the comment-resolution
process for other dose reconstruction procedures under review by the
Subcommittee.

The agenda is subject to change as priorities dictate.

This meeting is open to the public,
but without a public comment period.

In the event an individual wishes to
provide comments, written comments
may be submitted. Any written
comments received will be provided at
the meeting and should be submitted to
the contact person below in advance of
the meeting.

Contact Person for More Information:
Theodore Katz, Designated Federal
Officer, NIOSH, CDC, 1600 Clifton
Road, Mailstop E–20, Atlanta, Georgia
30333, Telephone (513) 533–6800, Toll
Free 1 (800) CDC–INFO, E-mail
dcas@cdc.gov.

The Director, Management Analysis and
Services Office, has been delegated
the authority to sign Federal Register
notices pertaining to announcements of
meetings and other committee
management activities, for both CDC and
the Agency for Toxic Substances and Disease Registry.

Dated: September 17, 2010.

Elaine L. Baker,
Director, Management Analysis and Services
Office, Centers for Disease Control and
Prevention.

BILING CODE 4163–18–P

DEPARTMENT OF HEALTH AND
HUMAN SERVICES

National Institutes of Health

National Institute of Dental &
Craniofacial Research; Notice of
Closed Meetings

Pursuant to section 10(d) of the
Federal Advisory Committee Act, as
amended (5 U.S.C. App.), notice is
hereby given of the following meetings.

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

Name of Committee: National Institute of
Dental and Craniofacial Research Special
Emphasis Panel; Scientific Review of P01
Applications submitted to PAR 08–117.

Date: October 20, 2010.
Time: 8 a.m. to 6 p.m.
Agenda: To review and evaluate grant
applications.

Place: Courtyard by Marriott, 5520
Wisconsin Avenue, Chevy Chase, MD 20815.

Contact Person: Marilyn Moore-Hoon, PhD,
Scientific Review Officer, Scientific Review
Branch, National Institute of Dental and
Craniofacial Research, 6701 Democracy
Blvd., Rm. 676, Bethesda, MD 20892–4878, 301–594–4861, mooremar@niddcr.nih.gov.

Name of Committee: National Institute of
Dental and Craniofacial Research Special
Emphasis Panel; Review F30s, R03.

Date: October 18, 2010.
Time: 2:30 p.m. to 3:30 p.m.
Agenda: To review and evaluate grant
applications.

Place: National Institutes of Health, One
Democracy Plaza, 6701 Democracy
Boulevard, Bethesda, MD 20892 (Telephone
Conference Call).

Contact Person: Mary Kelly, Scientific
Review Officer, Scientific Review Branch,