

risk adjustment data validation process. The stakeholder meeting will focus on topics including, but not limited to, data validation audit standards, sampling, initial and second validation audits, appeals, and error rates. The meeting is open to the public, but attendance is limited to the space available. There are capabilities for remote access. Persons wishing to attend this meeting must register by the date listed in the "Registration" section above, and by visiting www.REGTAP.info.

III. Security, Building, and Parking Guidelines

The meeting will be held within the CMS Complex, which is not open to the general public. Visitors to the complex are required to show a valid U.S. Government issued photo identification, preferably a driver's license, at the time of entry. Participants will also be subject to a vehicular search before access to the complex is granted. Participants not in possession of a valid identification or who are in possession of prohibited items will be denied access to the complex. Prohibited items on Federal property include, but are not limited to, alcoholic beverages, illegal narcotics, explosives, firearms or other dangerous weapons (including pocket knives), and dogs or other animals (except service animals). Once cleared for entry to the complex, participants will be directed to parking by a security officer.

To ensure expedited entry into the building, it is recommended that participants have their ID and a copy of their written meeting registration confirmation readily available and that they do not bring laptops or large/bulky items into the building. Participants are reminded that photography on the CMS complex is prohibited. CMS has also been declared a tobacco free campus and violators are subject to legal action. In planning arrival time, we recommend allowing additional time to clear security. Individuals who are not registered in advance will not be permitted to enter the building and will be unable to attend the meeting. The public may not enter the building earlier than 45 minutes before the meeting convenes. Guest access to the CMS complex is limited to the meeting area, the main lobby, and the cafeteria. If a visitor is found outside of those areas without proper escort, they may be escorted by a security officer out of the complex.

Please be mindful that, at the meeting, and subject to the constraints of the meeting agenda and allotted meeting time, there will be an opportunity for individuals to speak, and we request that individuals wait for the appropriate

time to present their questions or comments. Disruptive behavior will not be tolerated, and may result in removal from the meeting and/or escort from the complex. Visitors may not attach USB cables, flash/thumb drives, or any other equipment to any CMS information technology (IT) system or hardware for any purpose at anytime. Additionally, CMS staff is prohibited from taking such actions on behalf of a visitor, or utilizing any removable media provided by a visitor.

We cannot assume responsibility for coordinating the receipt, transfer, transport, storage, set-up, safety, or timely arrival of any personal belongings or items used for demonstration or to support a presentation. Special accommodations, arrangements, and approvals to bring pieces of equipment or medical devices are required by June 19, 2013, 5:00 p.m., e.d.t. These arrangements need to be made with the registrar@REGTAP.info. It is possible that certain requests made in advance of the public meeting may be denied because of unique safety, security or handling issues related to the equipment.

CMS policy requires that every foreign national (as defined by the Department of Homeland Security is "an individual who is a citizen of any country other than the United States") is assigned a host (in accordance with the Department Foreign Visitor Management Policy, Appendix C, Guidelines for Hosts and Escorts). The host/hosting official is required to inform the Division of Critical Infrastructure Protection (DCIP) at least 12 business days in advance of any visit by a foreign national. Foreign nationals will be required to produce a valid passport at the time of entry.

Attendees that are foreign nationals need to identify themselves as such, and provide the following information for security clearance to the registrar@REGTAP.info by the date specified in the "REGISTRATION" section of this notice:

- Visitor's full name (as it appears on passport).
- Gender.
- Country of origin and citizenship.
- Biographical data and related information.
- Date of birth.
- Place of birth.
- Passport number.
- Passport issue date.
- Passport expiration date.
- Dates of visits.
- Company Name.
- Position/Title.

Dated: May 23, 2013.

Marilyn Tavenner,

Acting Administrator, Centers for Medicare & Medicaid Services.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

Privacy Act of 1974; Report of an Altered CMS System of Records Notice

AGENCY: Centers for Medicare & Medicaid Services (CMS), Department of Health and Human Services (HHS).

ACTION: Altered System of Records Notice (SORN).

SUMMARY: In accordance with the requirements of the Privacy Act of 1974 (5 USC 552a), CMS proposes the following alterations to existing system of records (SOR) number 09-70-0560 "Health Insurance Exchanges (HIX) Program," published at 78 **Federal Register** (FR) 8538 (February 6, 2013):

1. Add "Relevant Individual(s)" as a new category of individuals;
2. Add personally identifiable information (PII) pertaining to "Relevant Individual(s)" as a new category of records;
3. Add new purposes to describe the reason for the above additions; and
4. Revise existing routine uses to authorize the agency to disclose PII of "Relevant Individual(s)" to parties outside the agency.

DATES: *Effective Dates:* Effective 30 days after publication of this notice in the **Federal Register** unless comments received on or before that date result in revisions to this notice.

ADDRESSES: The public should send comments to: CMS Privacy Officer, Division of Privacy Policy, Privacy Policy and Compliance Group, Office of E-Health Standards & Services, Offices of Enterprise Management, CMS, Room S2-24-25, 7500 Security Boulevard, Baltimore, Maryland 21244-1850. Comments received will be available for review at this location, by appointment, during regular business hours, Monday through Friday from 9:00 a.m.-3:00 p.m., Eastern Time zone.

FOR FURTHER INFORMATION CONTACT: Karen Mandelbaum, JD, MHA, Office of Health Insurance Exchanges, Consumer Information and Insurance Systems Group, Center for Consumer Information and Insurance Oversight, 7210 Ambassador Road, Baltimore, MD 21244, Office Phone: (410) 786-1762,

Facsimile: (301) 492-4353, Email: karen.mandelbaum@cms.hhs.gov.

SUPPLEMENTARY INFORMATION: CMS proposes to alter the SOR to add “Relevant Individual(s)” as a category of individuals whose PII is necessary for determining the eligibility of applicants for insurance affordability programs or a certification of exemption under provisions of the Patient Protection and Affordable Care Act (Pub. L. 111-148), as amended by the Health Care and Education Reconciliation Act of 2010 (Pub. L. 111-152) (collectively referred to as the Affordable Care Act) and CMS’ implementation of the Affordable Care Act.

For the purpose of this SORN, “Relevant Individual(s)” means any individual listed on an application for an insurance affordability program or certification of exemption whose PII may bear upon the eligibility of an individual for an insurance affordability program (as defined in 42 CFR 435.4 and 45 CFR 155.20),¹ or certification of exemption. These individuals include non-applicant household members/family members, certain non-applicant tax payers or tax filers, and spouses and parents of applicants. Due to the potential impact of the Relevant Individuals’ PII on an individual’s eligibility determination this category of individuals is added to the SOR.

Additionally, Routine Use #3 is proposed to be modified to permit CMS to disclose information about Relevant Individual(s), in addition to applicants, in order to obtain information from other Federal and State agencies and third party data sources that provide information to CMS, pursuant to agreements with CMS, for purposes of determining eligibility of applicants to enroll in qualified health plans (QHP) through an Exchange, in insurance affordability programs, or for a certification of exemption from the individual responsibility requirement. Routine Use #8 is proposed to be modified to enable CMS to provide information about Relevant Individual(s), in addition to applicants, to application filers who are filing on behalf of those applicants for whom an eligibility determination will require information about the Relevant Individual(s).

The proposed changes require the following alterations to sections of the notice.

1. Categories of Individuals Covered by the System: Remove the “and” before “(7)” and add the following at the end of this section:

“and (8) Individuals, including non-applicant household members/family members, non-applicant tax payers or tax filers, and spouses and parents of applicants, who are listed on the application and whose PII may bear upon a determination of the eligibility of an individual for an insurance affordability program and for certifications of exemption from the individual responsibility requirement. Such individuals will hereafter be referred to as “Relevant Individual(s)”.”

2. Categories of Records in the System: Add the following to the end of the first paragraph of this section:

“The system will collect and maintain information pertaining to Relevant Individual(s) that includes the following: First name, last name, middle initial, permanent residential address, date of birth, SSN (if the Relevant Individual has one or is required to provide it as specified in 45 CFR 155.305(f)(6)), taxpayer status, gender, residency, relationship to applicant, employer information, and household income, including tax information from the IRS, income information from the Social Security Administration, and financial information from other third party sources.”

3. Purpose(s) of the System: Replace the first sentence of the first paragraph of this section with the following sentence:

“The purpose of this system is to collect, create, use and disclose PII about individuals who apply for eligibility determinations for enrollment in a QHP through the Exchange, for insurance affordability programs, and for certifications of exemption from the individual responsibility requirement and on Relevant Individual(s) whose PII may bear upon a determination of the eligibility of an individual for an insurance affordability program and for certifications of exemption from the individual responsibility requirement.”

4. Routine Use #3: Delete entry and replace with:

“To disclose information about applicants and Relevant Individual(s) in order to obtain information from other Federal agencies and State agencies and third party data sources that provide information to CMS, pursuant to agreements with CMS, for purposes of determining the eligibility of applicants to enroll in QHPs through an Exchange, in insurance affordability programs, or for a certification of exemption from the individual responsibility requirement.”

5. Routine Use #8: Delete entry and replace with:

“To provide information about applicants and Relevant Individual(s) to

applicants/enrollees, authorized representatives of applicants/enrollees, and application filers, who are filing on behalf of those applicants, when relevant and necessary to determine eligibility for enrollment in a QHP through an Exchange, insurance affordability programs, or a certification of exemption from the individual responsibility requirement.”

The information collected by this system and the purposes for which it is used and disclosed by CMS are described in the modifications to the SORN as stated above.

Michelle Snyder,

Deputy Chief Operating Officer, Centers for Medicare & Medicaid Services.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

Privacy Act of 1974; Report of a New Routine Use for Selected CMS Systems of Records

AGENCY: Centers for Medicare & Medicaid Services (CMS) Department of Health and Human Services (HHS).

ACTION: Altered System Notice, Adding a New Routine Use for Selected CMS Systems of Records.

SUMMARY: In accordance with the requirements of the Privacy Act of 1974 (5 U.S.C. 552a), CMS is adding a new routine use to twenty-three CMS systems of records to assist in preventing and detecting fraud, waste and abuse. The new routine use will authorize CMS to disclose provider and beneficiary-identifiable records to representatives of health plans for the purpose of preventing and detecting fraud, waste and abuse, pursuant to section 1128C(a)(2) of the Social Security Act (“the Act”). At section 1128C(c) of the Act, a health plan is defined as a plan or program that provides health benefits, whether directly, through insurance, or otherwise, and includes: (1) A policy of health insurance; (2) a contract of a service benefit organization; and (3) a membership agreement with a health maintenance organization or other prepaid health plan.

Disclosures made pursuant to the routine use will be coordinated through CMS’ Data Sharing and Partnership Group, Center for Program Integrity, CMS. CMS has identified twenty-three systems that contain the data potentially

¹ See also 78 FR 8539, 8540.