DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Disease, Disability, and Injury Prevention and Control Special Emphasis Panel (SEP): Initial Review; Cancelation

This is to announce the cancelation of a meeting, Operations Research (Implementation Science) for Strengthening Global Health Protection, Funding Opportunity Announcement (FOA) GH16–007, initial review.

Nomination materials must be postmarked by August 12, 2016 and sent to ACDirector@cdc.gov, or to Tracie Strength, Office of the Chief of Staff, Centers for Disease Control and Prevention, 1600 Clifton Road NE., Mailstop D14, Atlanta, Georgia, 30329. Please direct questions to Tracie at (404) 498–6482.

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 the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Catherine Ramadei,
Acting Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

[FR Doc. 2016–17795 Filed 7–27–16; 8:45 am] BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (NCHHSTP)—Advisory Council for the Elimination of Tuberculosis (ACET)

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 committee.

Time and Date: 10:00 a.m.–3:30 p.m., EDT, August 24, 2016.
Place: Corporate Square, Building 8, 1st Floor Conference Room, Atlanta, Georgia 30329. This meeting is also accessible by Web conference.
Toll free number +1 877–951–7311, Participant Code: 4722733.
Status: This meeting is open to the public, limited only by the meeting room space and Web ports available. The meeting room accommodates 100 people and there will be 100 Web conference ports available. Persons who desire to make an oral statement may request it at the time of the public comment period on August 24, 2016 at 3:20 p.m. (EDT). Public participation and the ability to comment will be limited as time permits.
Purpose: This council advises and makes recommendations to the Secretary of Health and Human Services, the Assistant Secretary for Health, and the Director, CDC, regarding the elimination of tuberculosis (TB).
Specifically, the Council makes recommendations regarding policies, strategies, objectives, and priorities; addresses the development and application of new technologies; and reviews the extent to which progress has been made toward eliminating tuberculosis.
Matter for Discussion: Agenda items include the following topics: (1) Division of Tuberculosis Elimination’s Communication Plan for U.S. Preventive Services Task Force (USPSTF) Recommendations; (2) Analysis of TB Surveillance Data; (3) Update on Molecular Testing; (4) Updates from Workgroups; and (5) other Tuberculosis-related Issues.
Agenda items are subject to change as priorities dictate.

Contact Person for More Information: Margie Scott-Cseh, Committee Management Specialist, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, Centers for Disease Control and Prevention, 1600 Clifton Road NE., Mailstop: E–07, Atlanta, Georgia 30333, telephone (404) 639–8317; Email: zkrg@cdc.gov

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Catherine Ramadei,
Acting Director, Management Analysis and Services Office, Centers for Disease Control and Prevention (CDC).

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

National Center for Chronic Disease Prevention and Health Promotion, Intergency Committee on Smoking and Health (ICSH)

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

Time and Date: 9:00 a.m.–4:30 p.m., EDT, August 23, 2016.
Place: U.S. Department of Health and Human Services, Hubert H. Humphrey Building, Room 800 located at 200 Independence Avenue SW., Washington, DC 20201. Telephone: (202) 245–0552. This meeting is also accessible by teleconference.
Login information for teleconference is as follows:
Toll Free Phone#: (800)988–0209.
Conference number: PW9322824.
Participant passcode: 5816979.
DEPARTMENT OF HEALTH AND HUMAN SERVICES (HHS)

Centers for Medicare & Medicaid Services

Notice of Opportunity for Hearing on Compliance of Arkansas State Plan Provisions Concerning Provision of Benefits During a Reasonable Opportunity Period With Titles XI and XIX (Medicaid) of the Social Security Act

AGENCY: Centers for Medicare & Medicaid Services (CMS), HHS.


CLOSING DATE: Requests to participate in the hearing as a party must be received by the presiding officer by August 29, 2016.

FOR FURTHER INFORMATION CONTACT: Benjamin R. Cohen, Hearing Officer, Centers for Medicare & Medicaid Services, 2520 Lord Baltimore Drive, Suite L, Baltimore, MD 21244.

SUPPLEMENTARY INFORMATION: This notice announces the opportunity for an administrative hearing concerning the finding of the Administrator of the Centers for Medicare & Medicaid Services (CMS) that the State of Arkansas is not providing Medicaid benefits during a reasonable opportunity period.

Section 1902(a)(46) of the Social Security Act (the Act) requires state plans for medical assistance to provide “that information is requested and exchanged for purposes of income and eligibility verification in accordance with a State system which meets the requirements of section 1137 of this Act.” Section 1137(d) of the Act and regulations at 42 CFR 435.911(c) require that the state agency provide a reasonable opportunity period to individuals who are determined otherwise eligible for Medicaid but for whom the state agency is unable to promptly verify satisfactory immigration status. In its approved State Plan Amendment (SPA) 13–0018, the Arkansas Department of Human Services (DHS) provides assurance that it provides Medicaid to citizens and nationals of the United States and to certain non-citizens, including during a reasonable opportunity period pending verification of their citizenship, national status or satisfactory immigration status, in accordance with the requirements of sections 1902(a)(46), 1902(ee), 1903(x) and 1137(d) of the Act. Despite such assurance in the Medicaid state plan, it is CMS’ understanding based on numerous discussions and interactions with the state that Arkansas is not providing Medicaid benefits to individuals who declared under penalty of perjury that they are in a satisfactory immigration status, have met all other eligibility requirements for Medicaid in the state, and are pending verification of their immigration status.

With a formal determination by the CMS Administrator that the Arkansas DHS has failed to comply substantially with these requirements, made after a hearing or absent a hearing request, CMS will begin this FFP withholding and it will continue until the Arkansas DHS comes into compliance with the requirement to provide Medicaid benefits during a reasonable opportunity period for otherwise eligible non-citizens who have declared under penalty of perjury that they are in a satisfactory immigration status.

Arkansas submitted state plan amendment (SPA) Transmittal Number 13–0018 on September 23, 2013, which described the Arkansas DHS’s policies and practices related to citizenship and non-citizen eligibility, including the assurance that the Arkansas DHS provides Medicaid benefits during the reasonable opportunity period to individuals who have declared under penalty of perjury that they are in a satisfactory immigration status pending verification of such status. During the review of this SPA, CMS learned that the Arkansas DHS was not providing Medicaid benefits during a reasonable opportunity period to individuals who have declared under penalty of perjury that they are in a satisfactory immigration status and who meet all other eligibility requirements in the state, pending verification of such status. Throughout 2014 and 2015, CMS and Arkansas engaged in extensive technical assistance discussions. CMS sent a letter to the Arkansas DHS on April 1, 2015, reiterating the requirement for Arkansas to comply with the statute and regulations. During this time, CMS received multiple draft corrective action plans (CAPs) from Arkansas that set out schedules to come into compliance with section 1137(d) of the Act by July 1, 2014, October 2015, April 2016, and, most recently, August 2016.

On November 3, 2015, CMS approved Arkansas’ SPA 13–0018. At the same time, CMS issued a companion letter informing Arkansas that, if it did not demonstrate compliance with these requirements within 30 days of the date of the letter, CMS would initiate formal compliance proceedings. To date, CMS