

Agenda items for these meetings are subject to change as priorities dictate.

Francis D. Chesley, Jr.

Acting Deputy Director.

[FR Doc. 2018–20126 Filed 9–14–18; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Docket No. CDC–2018–0090]

Draft Update to the Centers for Disease Control and Prevention Infection Prevention and Control Recommendation Categorization Scheme

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (DHHS).

ACTION: Notice with comment period.

SUMMARY: The Centers for Disease Control and Prevention (CDC), in the Department of Health and Human Services (HHS), announces the opening of a docket to obtain comment on the *Draft Update to the Centers for Disease Control and Prevention Infection Prevention and Control Recommendation Categorization Scheme (Draft Update)*. The *Draft Update* provides updated categories that specify the strength of CDC's Infection Prevention and Control Guideline Recommendations. The *Draft Update* also includes recommendation justification tables, a new component of the recommendation development process, that provide transparency into the considerations weighed when developing infection prevention and control recommendations.

DATES: Written comments must be received on or before October 17, 2018.

ADDRESSES: You may submit comments, identified by Docket No. CDC–2018–0090 by any of the following methods:

- *Federal eRulemaking Portal:* <http://www.regulations.gov>. Follow the instructions for submitting comments.
- *Mail:* Division of Healthcare Quality Promotion, National Center for Emerging and Zoonotic Infectious Diseases, Centers for Disease Control and Prevention, Attn: Docket No. CDC–2018–0090, HICPAC Secretariat, 1600 Clifton Rd. NE, Mailstop A–07, Atlanta, Georgia, 30329.

Instructions: Submissions via <http://www.regulations.gov> are preferred. All submissions received must include the agency name and Docket Number. All relevant comments received will be

posted without change to <http://www.regulations.gov>, including any personal information provided. For access to the docket to read background documents or comments received, go to <http://www.regulations.gov>.

FOR FURTHER INFORMATION CONTACT: Erin Stone, Division of Healthcare Quality Promotion, National Center for Emerging and Zoonotic Infectious Diseases, Centers for Disease Control and Prevention, 1600 Clifton Road NE, Mailstop A–07, Atlanta, Georgia, 30329; Telephone: (404) 639–4000.

SUPPLEMENTARY INFORMATION:

Public Participation

Interested persons or organizations are invited to participate by submitting written views, recommendations, and data.

Please note that comments received, including attachments and other supporting materials, are part of the public record and are subject to public disclosure. Comments will be posted on <https://www.regulations.gov>. Therefore, do not include any information in your comment or supporting materials that you consider confidential or inappropriate for public disclosure. If you include your name, contact information, or other information that identifies you in the body of your comments, that information will be on public display. CDC will review all submissions and may choose to redact, or withhold, submissions containing private or proprietary information such as Social Security numbers, medical information, inappropriate language, or duplicate/near duplicate examples of a mass-mail campaign. CDC will carefully consider all comments submitted in preparation of the final *Update to the Centers for Disease Control and Prevention Infection Prevention and Control Recommendation Categorization Scheme* and may revise the final document as appropriate.

Background

This *Draft Update* is a recommendation from the Healthcare Infection Control Practices Advisory Committee (HICPAC) to CDC on the updating of CDC's infection prevention and control recommendation categories. The *Draft Update* is located in the “Supporting & Related Material” tab of the docket.

HICPAC is a federal advisory committee charged with providing advice and guidance to the Centers for Disease Control and Prevention, and includes representatives from the public health and infectious diseases fields, regulatory and other federal agencies,

professional societies, and other stakeholders. This *Draft Update* is not a Federal rule or regulation.

Once finalized, the Recommendation Categories and supporting Justification Tables will be used by CDC, HICPAC, and HICPAC's workgroups in the development of infection prevention and control guideline recommendations.

Dated: September 12, 2018.

Sandra Cashman,

Executive Secretary, Centers for Disease Control and Prevention.

[FR Doc. 2018–20118 Filed 9–14–18; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS–7051–CN]

Medicare & Medicaid Programs, and Other Program Initiatives, and Priorities; Meeting of the Advisory Panel on Outreach and Education (APOE), September 26, 2018; Correction

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

ACTION: Correction notice.

SUMMARY: This document corrects a technical error in the meeting notice that appeared in the August 31, 2018 *Federal Register* titled “Medicare & Medicaid Programs, and Other Program Initiatives, and Priorities; Meeting of the Advisory Panel on Outreach and Education (APOE), September 26, 2018.”

FOR FURTHER INFORMATION CONTACT: Lynne Johnson, (410) 786–0090.

SUPPLEMENTARY INFORMATION:

I. Background and Summary of Errors

In FR Doc. 2018–18961 of August 31, 2018 (83 FR 44632), we made an error in the meeting registration hyperlink.

II. Correction of Errors

In FR Doc. 2018–18961 of August 31, 2018 (83 FR 44632), make the following correction:

1. On page 44632, second column, last paragraph, lines 5 and 6, the hyperlink “<https://www.regonline.com/apoe2018sept26meeting>” is corrected to read “<https://www.regonline.com/apoe2018sept26meeting>”.

Dated: September 12, 2018.

Kathleen Cantwell,

Director, Office of Strategic Operations and Regulatory Affairs.

[FR Doc. 2018-20153 Filed 9-14-18; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

Privacy Act of 1974; System of Records

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

ACTION: Notice of a modified system of records.

SUMMARY: The Department of Health and Human Services (HHS), Centers for Medicare & Medicaid Services (CMS), proposes to modify or alter an existing system of records subject to the Privacy Act, System No. 09-70-0541, titled “Medicaid Statistical Information System (MSIS).” This system of records covers the Medicaid dataset. The dataset includes standardized enrollment, eligibility, and paid claims of Medicaid recipients and is used to administer Medicaid at the Federal level, produce statistical reports, support Medicaid related research, and assist in the detection of fraud and abuse in the Medicare and Medicaid programs. CMS is adding two new routine use as numbers three and 10. CMS is including two routine uses that were published on February 14, 2018, and are numbered as eight and nine in the routine use section below. In addition, CMS is changing the name of the system of records to: Transformed-Medicaid Statistical Information System (T-MSIS) and making other modifications which are explained below.

DATES: In accordance with 5 U.S.C. 552a(e)(4) and (11), this notice is applicable September 17, 2018, subject to a 30-day period in which to comment on the routine uses. Submit any comments by October 17, 2018.

ADDRESSES: Written comments should be submitted by mail or email to: CMS Privacy Act Officer, Division of Security, Privacy Policy & Governance, Information Security & Privacy Group, Office of Information Technology, CMS, Location N1-14-56, 7500 Security Boulevard, Baltimore, MD 21244-1870, or walter.stone@cms.hhs.gov.

FOR FURTHER INFORMATION CONTACT: General questions about the system of records may be submitted to Darlene

Anderson, Health Insurance Specialist, Data and Systems Group, Center for Medicaid and CHIP Services (CMCS), CMS, Mail Stop S2-22-16, 7500 Security Boulevard, Baltimore, MD 21244, Telephone 410-786-9828 or email to Darlene.Anderson@cms.hhs.gov.

SUPPLEMENTARY INFORMATION:

I. Program and IT System Changes Prompting This SORN Modification

The Transformed Medicaid Statistical Information System (T-MSIS) is replacing the Medicaid Statistical Information System (MSIS) as the information technology (IT) system housing the national Medicaid dataset. It is a joint effort by the States and CMS to build a Medicaid dataset that addresses problems identified with Medicaid data in MSIS. T-MSIS provides improved program monitoring and oversight, technical assistance with states, policy implementation and data-driven and high-quality Medicaid program and Children’s Health Insurance Program (CHIP) that ensure better care, access to coverage, and improved health.

To improve Medicaid program oversight, CMS is requiring States to submit new files and data elements in T-MSIS which were not collected in MSIS, for the purpose of improving the quality of the data extracts the States submit to CMS on a quarterly or other periodic basis. Following consultation with a wide array of stakeholders, CMS established over 1,000 data elements for T-MSIS. This expands on the approximately 400 data elements collected in MSIS. T-MSIS builds on the original five MSIS files (eligibility and four types of claims: Inpatient, long-term care, pharmacy, and other) by adding files for third-party liability, information from managed-care plans, and providers. New T-MSIS Analytic Files (TAF) include: Beneficiary Files: Monthly beneficiary summary, annual beneficiary summary, Claims Files: Inpatients, long-term care, pharmacy and other files: Provider and Managed Care Files.

Currently, each state submits five extracts to CMS on a quarterly basis. These data are used by CMS to assist in federal reporting for the Medicaid and CHIP. Several reasons culminated in the CMS mission to improve the Medicaid dataset repository, including incomplete data, questionable results, multiple data collections from states, multiple federal data platforms and analytic difficulties in interpreting and presenting the results. In addition, timeliness issues have prompted CMS to re-evaluate its

processes and move toward a streamlined delivery, along with an enhanced data repository. The new T-MSIS extract format is expected to further CMS goals for improved timeliness, reliability and robustness through monthly updates and an increase in the amount of data requested.

II. Modifications to SORN 09-70-0541

The following modifications have been made to SORN 09-70-0541 in order to reflect changes to the system of records resulting from the IT system change from MSIS to T-MSIS and to update the SORN generally:

- The SORN has been reformatted to conform to the revised template prescribed in Office of Management and Budget (OMB) Circular A-108, issued December 23, 2016.

- The name of the system of records has been changed from “Medicaid Statistical Information System (MSIS)” to “Transformed—Medicaid Statistical Information System (T-MSIS), HHS/CMS/CMCS.”

- Address information in the System Location and System Manager(s) sections has been updated.

- The Authority section now cites applicable U.S. Code provisions instead of public laws.

- The Purpose section added information collecting over 1000 new data elements to perform expanded data analytics. The T-MSIS data set contains: enhanced information about beneficiary eligibility, beneficiary and provider enrollment, service utilization, claims and managed care data, and expenditure data for Medicaid and CHIP.

- The categories of individuals have not changed, but they are now more clearly delineated as Medicaid recipients and Medicaid providers.

- The Categories of Records section now specifies categories of records, in addition to a listing data elements. Including these categories for the existing five categories, the list has been expanded to add new categories (*i.e.*, files for third-party liability, information from managed-care plans, and providers.) and additional examples of data elements (such as tax identification number/employer identification number (TIN/EIN), national provider identifier (NPI), Social Security Number (SSN), prescriber identification number, and other assigned clinician numbers).

- The Record Source Categories section has added non-Medicare individuals, third party data submitter who are individuals; *i.e.*, Third Party Administrators (TPA); contact persons and authorized representatives (such as parents and guardians of Medicare