

By order of the Federal Deposit Insurance Corporation.

Robert E. Feldman,
Executive Secretary.

Dated: September 19, 2007.

By the Office of Thrift Supervision.

John Reich,
Director.

Dated: September 19, 2007.

By the National Credit Union Administration.

JoAnn M. Johnson,
Chairman.

[FR Doc. 07-4783 Filed 9-27-07; 8:45 am]

BILLING CODE 4810-33-P; 6210-01-P; 6714-01-P; 6720-01-P; 7535-01-P

DEPARTMENT OF VETERANS AFFAIRS

Reasonable Charges for Inpatient DRG and SNF Medical Services; 2008 Fiscal Year Update

AGENCY: Department of Veterans Affairs.

ACTION: Notice.

SUMMARY: Title 38 of the Code of Federal Regulations (CFR), section 17.01 sets forth the Department of Veterans Affairs (VA) medical regulations concerning "reasonable charges" for medical care or services provided or furnished by VA to a veteran for: (1) A non-service-connected disability for which the veteran is entitled to care or the payment of expenses of care under a health plan contract; (2) a non-service-connected disability incurred incident to the veteran's employment and covered under a worker's compensation law or plan that provides reimbursement or indemnification for such care and services; or (3) a non-service-connected disability incurred as a result of a motor vehicle accident in a State that requires automobile accident reparations insurance.

The regulations include methodologies for establishing billed amounts for the following types of charges: acute inpatient facility charges; skilled nursing facility and sub-acute inpatient facility charges; partial hospitalization facility charges; outpatient facility charges; physician and other professional charges, including professional charges for anesthesia services and dental services; pathology and laboratory charges; observation care facility charges; ambulance and other emergency transportation charges; and charges for durable medical equipment, drugs, injectables, and other medical services, items, and supplies identified by Healthcare Common Procedure Coding

System (HCPCS) Level II codes. The regulations also provide that data for calculating actual charge amounts at individual VA facilities based on these methodologies will either be published as a notice in the **Federal Register** or will be posted on the Internet site of the Veterans Health Administration Chief Business Office, currently at <http://www.va.gov/cbo>, under "Charge Data." Certain charges are hereby updated as described in the **SUPPLEMENTARY INFORMATION** Section of this notice. These changes are effective October 1, 2007.

In circumstances when charges for medical care or services provided or furnished at VA expense, by either VA or non-VA providers, have not been established under other provisions or regulations, the method for determining VA's charges is set forth at 38 CFR 17.101(a)(8).

FOR FURTHER INFORMATION CONTACT:

Romona Greene, Chief Business Office (168), Veterans Health Administration, Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420, (202) 254-0361. (This is not a toll free number.)

SUPPLEMENTARY INFORMATION: Of the charge types listed in the summary section of this notice, only the acute inpatient facility charges and skilled nursing facility and sub-acute inpatient facility charges are being changed. Charges for the following: partial hospitalization facility charges; outpatient facility charges; physician and other professional charges, including professional charges for anesthesia services and dental services; pathology and laboratory charges; observation care facility charges; ambulance and other emergency transportation charges; and charges for durable medical equipment, drugs, injectables, and other medical services, items, and supplies identified by HCPCS Level II codes are not being changed. These outpatient facility charges and professional charges remain the same as set forth in a notice published in the **Federal Register** on December 22, 2006 (71 FR 77096).

Based on the methodologies set forth in 38 CFR 17.101(b), this document provides an update to acute inpatient charges that were based on 2007 diagnosis related group (DRG). Acute inpatient facility charges by DRG are set forth in Table A in the September 28, 2006, **Federal Register** Notice. VA is adopting the Medicare Severity DRG (MS-DRG) classification system as established by the Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS)

(see Final Rule with Comment Period as published in the **Federal Register** on August 22, 2007, Vol. 72, No. 162 FR 47130). Table A in this notice provides updated charges based on Fiscal Year 2008 MS-DRGs and will replace Table A in the September 28, 2006, **Federal Register** Notice.

Also, this document provides for an updated all-inclusive per diem charge for skilled nursing facility/sub-acute inpatient facility charge using the methodologies set forth in 38 CFR 17.101(c) and it is adjusted by a geographic area factor based on the location where the care is provided. The skilled nursing facility/sub-acute inpatient facility per diem charge is set forth in Table B in the September 28, 2006, **Federal Register** Notice. Table B in this Notice provides the updated all-inclusive nationwide skilled nursing facility/sub-acute inpatient facility per diem charge and will replace Table B in the September 28, 2006 Notice. The charges in this update for acute inpatient facility and skilled nursing facility/sub-acute inpatient facility services are effective October 1, 2007.

In this update, VA is retaining the table designations used for acute inpatient facility charges by DRGs in the notice published in the **Federal Register** on September 28, 2006 (71 FR 57028). VA is retaining the table designation used for skilled nursing facility/sub-acute inpatient facility charges in the notice published in the **Federal Register** on September 28, 2006. Accordingly, the tables identified as being updated by this Notice correspond to the applicable tables published in the September 28, 2006, **Federal Register** Notice, beginning with Table A through Table B.

VA has updated the list of data sources presented in Supplementary Table 1 to reflect the updated data sources used to establish the updated charges described in this Notice.

The list of VA medical facility locations has also been updated. As a reminder, in Supplementary Table 3 published in the **Federal Register**, dated December 22, 2006 (71 FR 77096), we set forth the list of VA medical facility locations, which includes the first three-digits of their zip codes and provider-based/non-provider-based designations.

Consistent with VA's regulations, the updated data tables and supplementary tables containing the changes described in this notice will be posted on the Internet site of the Veterans Health Administration Chief Business Office, currently at <http://www.va.gov/cbo>, under "Charge Data."

Approved: September 25, 2007.

R. James Nicholson,

Secretary of Veterans Affairs.

[FR Doc. E7-19279 Filed 9-27-07; 8:45 am]

BILLING CODE 8320-01-P