

minimize the information collection burden.

DATES: Comments on the collection(s) of information must be received by the OMB desk officer by May 20, 2020.

ADDRESSES: When commenting on the proposed information collections, please reference the document identifier or OMB control number. To be assured consideration, comments and recommendations must be received by the OMB desk officer via one of the following transmissions:

Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to www.reginfo.gov/public/do/PRAMain. Find this particular information collection by selecting "Currently under 30-day Review—Open for Public Comments" or by using the search function.

To obtain copies of a supporting statement and any related forms for the proposed collection(s) summarized in this notice, you may make your request using one of following:

1. Access CMS' website address at website address at <https://www.cms.gov/Regulations-and-Guidance/Legislation/PaperworkReductionActof1995/PRA-Listing.html>.

1. Email your request, including your address, phone number, OMB number, and CMS document identifier, to Paperwork@cms.hhs.gov.

2. Call the Reports Clearance Office at (410) 786-1326.

FOR FURTHER INFORMATION CONTACT: William Parham at (410) 786-4669.

SUPPLEMENTARY INFORMATION: Under the Paperwork Reduction Act of 1995 (PRA) (44 U.S.C. 3501-3520), federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. The term "collection of information" is defined in 44 U.S.C. 3502(3) and 5 CFR 1320.3(c) and includes agency requests or requirements that members of the public submit reports, keep records, or provide information to a third party. Section 3506(c)(2)(A) of the PRA (44 U.S.C. 3506(c)(2)(A)) requires federal agencies to publish a 30-day notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension or reinstatement of an existing collection of information, before submitting the collection to OMB for approval. To comply with this requirement, CMS is publishing this notice that summarizes the following proposed collection(s) of information for public comment:

1. *Type of Information Collection Request:* Revision with change of a currently approved collection; *Title of Information Collection:* Medicare Current Beneficiary Survey; *Use:* CMS is the largest single payer of health care in the United States. The agency plays a direct or indirect role in administering health insurance coverage for more than 120 million people across the Medicare, Medicaid, CHIP, and Exchange populations. A critical aim for CMS is to be an effective steward, major force, and trustworthy partner in supporting innovative approaches to improving quality, accessibility, and affordability in healthcare. CMS also aims to put patients first in the delivery of their health care needs.

The Medicare Current Beneficiary Survey (MCBS) is the most comprehensive and complete survey available on the Medicare population and is essential in capturing data not otherwise collected through our operations. The MCBS is an in-person, nationally-representative, longitudinal survey of Medicare beneficiaries that we sponsor and is directed by the Office of Enterprise Data and Analytics (OEDA). The survey captures beneficiary information whether aged or disabled, living in the community or facility, or serviced by managed care or fee-for-service. Data produced as part of the MCBS are enhanced with our administrative data (e.g. fee-for-service claims, prescription drug event data, enrollment, etc.) to provide users with more accurate and complete estimates of total health care costs and utilization. The MCBS has been continuously fielded for more than 28 years, encompassing over 1 million interviews and more than 100,000 survey participants. Respondents participate in up to 11 interviews over a four year period. This gives a comprehensive picture of health care costs and utilization over a period of time.

The MCBS continues to provide unique insight into the Medicare program and helps CMS and our external stakeholders better understand and evaluate the impact of existing programs and significant new policy initiatives. In the past, MCBS data have been used to assess potential changes to the Medicare program. For example, the MCBS was instrumental in supporting the development and implementation of the Medicare prescription drug benefit by providing a means to evaluate prescription drug costs and out-of-pocket burden for these drugs to Medicare beneficiaries. Beginning in 2021, this proposed revision to the clearance will add a few new measures to existing questionnaire sections. The

revisions will result in a slight increase in respondent burden due to the addition of the new items. *Form Number:* CMS-P-0015A (OMB control number: 0938-0568); *Frequency:* Occasionally; *Affected Public:* Business or other for-profits and Not-for-profit institutions; *Number of Respondents:* 13,656; *Total Annual Responses:* 35,998; *Total Annual Hours:* 44,573. (For policy questions regarding this collection contact William Long at 410-786-7927.)

Dated: April 15, 2020.

William N. Parham, III,
Director, Paperwork Reduction Staff, Office of Strategic Operations and Regulatory Affairs.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS-1723-N]

Medicare Program; Virtual Public Meetings in June 2020 for New Public Requests for Revisions to the Healthcare Common Procedure Coding System (HCPCS) Coding for Durable Medical Equipment (DME) and Accessories, Orthotics and Prosthetics (O&P), Supplies and Other Non-Drug and Non-Biological Items

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

ACTION: Notice.

SUMMARY: This notice announces the dates and time of virtual Healthcare Common Procedure Coding System (HCPCS) public meetings to be held in June 2020 to discuss our preliminary coding recommendations for new public requests for revisions to the HCPCS Level II code set for Durable Medical Equipment (DME) and Accessories, Orthotics and Prosthetics (O&P), Supplies and other non-drug and non-biological items.

DATES:

Virtual Meeting Dates: Monday, June 1, 2020, 9 a.m. to 5 p.m., eastern daylight time (e.d.t.), and Tuesday, June 2, 2020, 9 a.m. to 12:30 p.m., e.d.t., for Durable Medical Equipment (DME) and Accessories, Orthotics and Prosthetics (O&P), Supplies and other non-drug and non-biological items.

Deadline for Primary Speaker Registration and Presentation Materials: The deadline for registering to be a primary speaker, and submitting

materials and writings that will be used in support of an oral presentation is 5 p.m., e.d.t., Thursday, May 14, 2020. There is a 10-page submission limit for any presentation materials. All registered primary speakers will be emailed a link for their individual use to join the meeting, in advance of the virtual meeting. Detailed information pertaining to registering to participate via WebEx, including dial-in information for Primary Speakers, 5-minute speakers, and all other attendees, will be provided in CMS' "Guidelines for Participation in HCPCS Public Meetings", as posted on CMS' HCPCS website at <https://www.cms.gov/Medicare/Coding/MedHCPCSGenInfo/HCPCSPublicMeetings> approximately two weeks prior to the HCPCS Public Meeting. We encourage all speakers to familiarize themselves with, and follow, protocol for participation as a speaker in CMS' HCPCS Public meetings as detailed in these guidelines.

Deadline for 5-Minute Speakers Registration: The deadline for registering to be a 5-Minute speaker is 5 p.m., e.d.t., Thursday, May 14, 2020. All 5-Minute speakers will be emailed a link for their individual use to join the meeting, in advance of the virtual meeting. Detailed information pertaining to registering to participate via WebEx, including dial-in information for Primary Speakers, 5-minute speakers, and all other attendees, will be provided in CMS' "Guidelines for Participation in HCPCS Public Meetings", as posted on CMS' HCPCS website at <https://www.cms.gov/Medicare/Coding/MedHCPCSGenInfo/HCPCSPublicMeetings> approximately two weeks prior to the HCPCS Public Meeting. We encourage all speakers to familiarize themselves with, and follow, protocol for participation as a speaker in CMS' HCPCS Public meetings as detailed in these guidelines.

Deadline for Registration for all Other Attendees: All individuals who plan to attend the virtual public meetings to listen, but are not registering as a primary or 5-minute speaker, may simply join the virtual meeting on the date that they plan to attend, using the meeting attendee link specified for that meeting date. A "raise your hand" feature will be available to ask questions. A meeting attendee link for each public meeting date will be posted approximately 2 weeks in advance of the public meetings on CMS' HCPCS website at <https://www.cms.gov/Medicare/Coding/MedHCPCSGenInfo>.

Deadline for Requesting Special Accommodations: Individuals who plan to participate in the virtual public meetings and require special assistance

must request these services by 5 p.m., e.d.t., Thursday, May 14, 2020.

Deadline for Submission of Written Comments: Written comments and other documentation in response to a preliminary coding determination that are received by no later than 5 p.m. on the date of the virtual public meeting at which the code request is scheduled for discussion will be considered in formulating a final coding decision.

ADDRESSES:

Virtual Meeting Location: The June 1 and June 2, 2020 HCPCS Public meetings will be held virtually via WebEx only. Detailed information pertaining to registering to participate via WebEx, including dial-in information for Primary Speakers, 5-minute speakers, and all other attendees, will be provided in CMS' "Guidelines for Participation in HCPCS Public Meetings", posted approximately 2 weeks prior to the HCPCS Public Meeting on CMS' HCPCS website at <https://www.cms.gov/Medicare/Coding/MedHCPCSGenInfo/HCPCSPublicMeetings>.

Written Comments: As part of CMS' response to the COVID-19 public health emergency, written comments from the general public and meeting registrants will only be accepted when emailed to HCPCS_Level_II_Code_Applications@cms.hhs.gov or to staff listed in the **FOR FURTHER INFORMATION CONTACT** section of this notice any time up to 5 p.m. on the date of the virtual public meeting at which a request is discussed. Due to the close timing of the virtual public meetings, subsequent CMS consideration, and final decisions, we are able to consider only those written comments received by the close of business (5 p.m.) on the date of the virtual public meeting at which the request is discussed.

FOR FURTHER INFORMATION CONTACT: Irina Akelaitis, (410) 786-4602, or Irina.Akelaitis@cms.hhs.gov; Felicia Kyeremeh, (410) 786-1898, or Felicia.Kyeremeh@cms.hhs.gov; Sundus Ashar, (410) 786-0750, or Sundus.Ashar1@cms.hhs.gov; or William Walker, (410) 786-5023, or William.Walker@cms.hhs.gov.

SUPPLEMENTARY INFORMATION:

I. Background

On December 21, 2000, the Congress passed the Medicare, Medicaid, and SCHIP Benefits Improvement and Protection Act of 2000 (BIPA) (Pub. L. 106-554). Section 531(b) of BIPA mandated that we establish procedures that permit public consultation for coding and payment determinations for new durable medical equipment (DME)

under Medicare Part B of title XVIII of the Social Security Act (the Act). In the November 23, 2001 **Federal Register** (66 FR 58743), we published a notice providing information regarding the establishment of the public meeting process for DME. The procedures and public meetings announced in that notice for new DME were in response to the mandate of section 531(b) of BIPA. As of 2020, we implemented changes to our HCPCS coding procedures that enable quarterly coding cycles for drugs and biological products, and bi-annual coding cycles for durable medical equipment, prosthetics, orthotics and supplies, and other non-drug, non-biological products. To achieve the time savings necessary to implement coding for the vast majority of drugs and biological products on a quarterly cycle, we will not be conducting public meetings for coding decisions on drugs and biological products. For the 2020 coding cycles, for drug and biological code applicants who are dissatisfied with CMS' coding decision in a quarterly coding cycle, we provide them an opportunity to resubmit their application in the next or subsequent quarterly cycle.

II. Virtual Meeting Registration

Due to the "Proclamation on Declaring a National Emergency Concerning the Novel Coronavirus Disease (COVID-19) Outbreak"¹ issued on March 13, 2020, there will not be an in-person meeting. The June 1 and June 2, 2020 HCPCS Public meetings will be virtual and available for remote audio attendance and participation only via WebEx.

A. Required Information for Registration

The following information must be provided when registering on-line to attend:

- Name.
 - Company name and address.
 - Direct-dial telephone and fax numbers.
 - Email address.
 - Special needs information.
- A CMS staff member will confirm your registration by email.

B. Registration Process

1. Primary Speakers

Individuals must also indicate whether they are the "primary speaker" for an agenda item. Primary speakers must be designated by the entity that submitted the HCPCS coding request.

¹ <https://www.whitehouse.gov/presidential-actions/proclamation-declaring-national-emergency-concerning-novel-coronavirus-disease-covid-19-outbreak/>.

When registering, primary speakers must provide a brief written statement regarding the nature of the information they intend to provide and advise CMS' HCPCS staff listed in the **FOR FURTHER INFORMATION CONTACT** section of this notice, regarding needs for audio/visual support. Speaker PowerPoint files are tested and arranged in speaker sequence well in advance of the meeting. We will accept emailed PowerPoint files that are received by the deadline for submissions of presentation materials as specified in the **DATES** section of this notice. Materials will only be accepted when emailed to HCPCS_Level_II_Code_Applications@cms.hhs.gov or to staff listed in the **FOR FURTHER INFORMATION CONTACT** section of this notice. Late submissions and updates of electronic materials after our deadline cannot be accommodated.

The sum of all presentation materials and additional supporting documentation should not exceed 10 pages (each side of a page counts as 1 page). An exception will be made to the 10-page limit only for relevant studies newly published between the application deadline and the virtual public meeting date, in which case, we request a copy of the complete publication be emailed as soon as possible to HCPCS_Level_II_Code_Applications@cms.hhs.gov or to staff listed in the **FOR FURTHER INFORMATION CONTACT** section of this notice. This exception applies only to the page limit and not the submission deadline.

Fifteen minutes is the total time interval for the presentation. In establishing the public meeting agenda, we may group multiple, related requests under the same agenda item. In that case, we will decide whether additional time will be allotted, and may opt to increase the amount of time allotted to the primary speaker.

Every primary speaker must declare at the beginning of the speaker's presentation at the meeting, as well as in the speaker's written summary, whether the speaker has any financial involvement with the manufacturers or competitors of any items being discussed; this includes any payment, salary, remuneration, or benefit provided to that speaker by the manufacturer or the manufacturer's representatives.

On the day of the virtual meeting, before the end of the meeting, all primary speakers must email a brief written summary of their comments and conclusions to CMS' HCPCS staff listed in the **FOR FURTHER INFORMATION CONTACT** section of this notice.

2. "5-Minute Speakers"

The deadline for registering to be a 5-Minute speaker is noted in the **DATES** section of this notice. Individuals must provide their name, company name and address, and contact information as specified in the instructions for remote participation, and identify the specific agenda item that they will address. Based on the number of items on the agenda and the progress of the meeting, a determination will be made at the meeting by the meeting coordinator and the meeting moderator regarding how many "5-minute speakers" can be accommodated and whether the 5-minute allocation would be reduced to accommodate the number of speakers.

Every 5-minute speaker must declare at the beginning of the speaker's presentation at the meeting, as well as in the speaker's written summary whether the speaker has any financial involvement with the manufacturers or competitors of any items being discussed; this includes any payment, salary, remuneration, or benefit provided to that speaker by the manufacturer or the manufacturer's representatives.

On the day of the virtual meeting, before the end of the meeting, all 5-minute speakers must email a brief written summary of their comments and conclusions to HCPCS_Level_II_Code_Applications@cms.hhs.gov or to CMS' HCPCS staff listed in the **FOR FURTHER INFORMATION CONTACT** section of this notice.

C. Additional Virtual Meeting/Registration Information

Prior to registering to attend a virtual public meeting, all participants are advised to review the public meeting agendas at <https://www.cms.gov/Medicare/Coding/MedHCPCSGenInfo/HCPCSPublicMeetings> which identify our preliminary coding recommendations, and the dates each item will be discussed. Draft agendas, including a summary of each request and our preliminary recommendations will be posted at least 2 weeks before each virtual meeting on our HCPCS website at <https://www.cms.gov/Medicare/Coding/MedHCPCSGenInfo/HCPCSPublicMeetings>.

All participants and other interested stakeholders are encouraged to regularly check CMS' official HCPCS website at <https://www.cms.gov/Medicare/Coding/MedHCPCSGenInfo/HCPCSPublicMeetings> for additional details regarding the public meeting process for new public requests for revisions to the HCPCS, including information on how to join the meeting remotely, and

guidelines for an effective presentation. In particular, please review the document titled "Guidelines for Participation in Public Meetings for New Public Requests for Revisions to the Healthcare Common Procedure Coding System (HCPCS)". Individuals who intend to provide a presentation at a virtual public meeting are encouraged to familiarize themselves with the HCPCS website and the valuable information it provides to prospective registrants. The HCPCS website also contains a document titled "Healthcare Common Procedure Coding System (HCPCS) Level II Coding Procedures," which is a description of the HCPCS coding process, including a detailed explanation of the procedures CMS uses to make coding determinations for the products, supplies, and services that are coded in the HCPCS.

The HCPCS website also contains a document titled "HCPCS Decision Tree & Definitions," which illustrates, in flow diagram format, HCPCS coding standards as described in our Coding Procedures document.

III. Written Comments From Meeting Attendees

As part of CMS' response to the COVID-19 public health emergency, there is a limited presence at the CMS headquarters for receiving paper packages. Therefore, written comments from the general public and meeting registrants will *only* be accepted when emailed to HCPCS_Level_II_Code_Applications@cms.hhs.gov or to staff listed in the **FOR FURTHER INFORMATION CONTACT** section of this notice any time up to 5 p.m. on the date of the virtual public meeting at which a request is discussed. Due to the close timing of the virtual public meetings, subsequent workgroup reconsiderations, and final decisions, we are able to consider only those written submissions received by the close of business (5 p.m.) on the date of the virtual public meeting at which the request is discussed.

The Administrator of the Centers for Medicare & Medicaid Services (CMS), Seema Verma, having reviewed and approved this document, authorizes Evell J. Barco Holland, who is the Federal Register Liaison, to electronically sign this document for purposes of publication in the **Federal Register**.

Evell J. Barco Holland,

Federal Register Liaison, Department of Health and Human Services.

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