Dated: September 26, 2019.

Jeffrey M. Martin,

Assistant Director, Office of Regulation Policy & Management, Office of the Secretary, Department of Veterans Affairs.

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BILLING CODE 8320-01-P

DEPARTMENT OF VETERANS AFFAIRS

Cost-Based and Inter-Agency Billing Rates for Medical Care or Services Provided by the Department of Veterans Affairs for FY 2020

ADDRESSES: The Department of Veterans Affairs.

ACTION: Notice.

SUMMARY: This document updates the Cost-Based and Inter-Agency billing rates for medical care or services provided by the Department of Veterans Affairs (VA) furnished in certain circumstances.

DATES: The rates set forth herein are effective October 1, 2019.

FOR FURTHER INFORMATION CONTACT:

Romona Greene, Office of Community Care, Revenue Operations, Payer Relations and Services, Rates and Charges (10D1C1), Veterans Health Administration (VHA), Department of Veterans Affairs, 810 Vermont Avenue NW, Washington, DC 20420, (202) 382–2521. (This is not a toll free number.) **SUPPLEMENTARY INFORMATION:** VA's methodology for computing Cost-Based and Inter-Agency rates for medical care or services provided by VA is set forth in 38 Code of Federal Regulations 17.102(h). Two sets of rates are obtained by applying this methodology, Cost-Based and Inter-Agency.

Cost-Based rates apply to medical care and services that are provided by VA under § 17.102(a), (b), (d) and (g), respectively, in the following circumstances:

- In error or based on tentative eligibility,
 - In a medical emergency,
 - To pensioners of allied nations, and
- For research purposes in circumstances under which the medical care appropriation shall be reimbursed from the research appropriation.

Inter-Agency rates apply to medical care and services that are provided by VA under § 17.102(c) and (f), respectively, in the following circumstances when the care or services provided are not covered by any applicable sharing agreement in accordance with § 17.102(e):

• To beneficiaries of the Department of Defense or other Federal agencies; and • To military retirees with chronic disability.

The calculations for the Cost-Based and Inter-Agency rates are the same with two exceptions. Inter-Agency rates are all-inclusive and are not broken down into three components (i.e., Physician; Ancillary; and Nursing, Room and Board), and do not include standard fringe benefit costs that cover Government employee retirement, disability costs, and return on fixed assets. When VA pays for medical care or services from a non-VA source under circumstances in which the Cost-Based or Inter-Agency rates would apply if the care or services had been provided by VA, the charge for such care or services will be the actual amount paid by VA for the care or services. Inpatient charges will be at the per diem rates shown for the type of bed section or discrete treatment unit providing the

The following table depicts the Cost-Based and Inter-Agency rates that are effective October 1, 2019 and will remain in effect until the next fiscal year **Federal Register** update. These rates supersede those established by the **Federal Register** notice published on August 28, 2018, at 83 FR 43958.

	Cost-based rates	Inter-agency rates
A. Hospital Care per inpatient day:		
General Medicine:		
All Inclusive Rate	\$4,301	\$4,156
Physician	515	
Ancillary	1,121	
Nursing Room and Board	2,665	
Neurology:		
All Inclusive Rate	4,232	4,086
Physician	620	
Ancillary	1,117	
Nursing Room and Board	2,495	
Rehabilitation Medicine:		
All Inclusive Rate	2,910	2,803
Physician	331	
Ancillary	889	
Nursing Room and Board	1,690	
Blind Rehabilitation:		
All Inclusive Rate	1,995	1,920
Physician	161	
Ancillary	991	
Nursing Room and Board	843	
Spinal Cord Injury:		
All Inclusive Rate	2,636	2,540
Physician	327	
Ancillary	663	
Nursing Room and Board	1,646	
Surgery:		
All Inclusive Rate	7,526	7,272
Physician	829	
Ancillary	2,283	
Nursing Room and Board	4,414	
General Psychiatry:		
All Inclusive Rate	2,174	2,091
Physician	205	

	Cost-based rates	Inter-agency rates
Ancillary	342	
Nursing Room and Board	1,627	
Substance Abuse (Alcohol and Drug Treatment):	,	
All Inclusive Rate	2,232	2,147
Physician	213	
Ancillary	516	
Nursing Room and Board	1,503	
Psychosocial Residential Rehabilitation Program:		
All Inclusive Rate	826	797
Physician	52	
Ancillary	87	
Nursing Room and Board	687	
Intermediate Medicine:		
All Inclusive Rate	3,301	3,182
Physician	162	
Ancillary	484	
Nursing Room and Board	2,655	
Poly-trauma Inpatient:		
All Inclusive Rate	3,223	3,097
Physician	366	
Ancillary	985	
Nursing Room and Board	1,872	
B. Nursing Home Care, Per Day:		
All Inclusive Rate	1,361	1,311
Physician	42	
Ancillary	184	
Nursing Room and Board	1135	
C. Outpatient Medical Treatments:		
Outpatient Visit (to include Ineligible Emergency Dental Care)	389	376
Outpatient Physical Medicine & Rehabilitation Service Visit	238	228
Outpatient Poly-trauma/Traumatic Brain Injury	671	649

Note: Outpatient Prescriptions will be billed at Drug Cost plus Administrative Fee.

Signing Authority

The Secretary of Veterans Affairs, or designee, approved this document and authorized the undersigned to sign and submit the document to the Office of the Federal Register for publication electronically as an official document of the Department of Veterans Affairs. Robert L. Wilkie, Secretary, Department of Veterans Affairs, approved this document on September 26, 2019, for publication.

Dated: September 26, 2019.

Jeffrey M. Martin,

Assistant Director, Office of Regulation Policy & Management, Office of the Secretary, Department of Veterans Affairs.

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DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900-0144]

Agency Information Collection Activity: HUDVA Addendum to Uniform Residential Loan Application

AGENCY: Veterans Benefits

Administration; Department of Veterans

Affairs.

ACTION: Notice.

SUMMARY: Veterans Benefits
Administration, Department of Veterans
Affairs (VA), is announcing an
opportunity for public comment on the
proposed collection of certain
information by the agency. Under the
Paperwork Reduction Act (PRA) of
1995, Federal agencies are required to
publish notice in the Federal Register
concerning each proposed collection of
information, including each proposed
extension of a currently approved
collection, and allow 60 days for public
comment in response to the notice.

DATES: Written comments and recommendations on the proposed collection of information should be received on or before November 29, 2019.

ADDRESSES: Submit written comments on the collection of information through Federal Docket Management System (FDMS) at www.Regulations.gov or to Nancy J. Kessinger, Veterans Benefits Administration (20M33), Department of Veterans Affairs, 810 Vermont Avenue NW, Washington, DC 20420 or email to nancy.kessinger@va.gov. Please refer to "OMB Control No. 2900–0144" in any correspondence. During the comment period, comments may be viewed online through FDMS.

FOR FURTHER INFORMATION CONTACT:

Danny Green at (202) 421–1354.

SUPPLEMENTARY INFORMATION: Under the PRA of 1995, Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. This request for comment is being made pursuant to Section 3506(c)(2)(A) of the PRA.

With respect to the following collection of information, VBA, invites comments on: (1) Whether the proposed collection of information is necessary for the proper performance of VBA's functions, including whether the information will have practical utility; (2) the accuracy of VBA's estimate of the burden of the proposed collection of information; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or the use of other forms of information technology.

Authority: Public Law 104–13; 44 U.S.C. 3501–21.

Title: HUDVA Addendum to Uniform Residential Loan Application, VA form 26–1802a.

OMB Control Number: 2900–0144. Type of Review: Extension of a currently approved collection.