

The following paragraph applies to the reporting and recordkeeping requirements addressed in this notice. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the collection of information displays a valid OMB control number. Records required to be retained under the BSA must be retained for five years. Generally, information collected pursuant to the BSA is confidential, but may be shared as provided by law with regulatory and law enforcement authorities.

Request for Comments: Comments submitted in response to this notice will be summarized and/or included in the request for OMB approval. All comments will become a matter of public record. Comments are invited on: (a) Whether the collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology; and (e) estimates of capital or start-up costs and costs of operation, maintenance and purchase of services to provide information.

Dated: September 11, 2014.

Jennifer Shasky Calvery,
Director, Financial Crimes Enforcement
Network.

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DEPARTMENT OF VETERANS AFFAIRS

Annual Pay Ranges for Physicians and Dentists of the Veterans Health Administration

AGENCY: Department of Veterans Affairs.
ACTION: Notice.

SUMMARY: As required by the "Department of Veterans Affairs Health Care Personnel Enhancement Act of 2004" (Pub. L. 108-445, dated December 3, 2004) the Department of Veterans Affairs (VA) is hereby giving notice of annual pay ranges for Veterans Health Administration (VHA) physicians and dentists as prescribed by the Secretary for VA-wide applicability. These annual pay ranges are intended to enhance VA flexibility to recruit,

develop, and retain the most highly qualified providers to serve our Nation's veterans and maintain a standard of excellence in the VA healthcare system.

DATES: *Effective Date:* The annual pay ranges listed in this notice are effective November 30, 2014.

FOR FURTHER INFORMATION CONTACT: Debra Doty, HR Specialist/Title 38 Program Manager, Compensation and Classification Service (055), Office of Human Resources Management, Department of Veterans Affairs, 810 Vermont Avenue NW., Washington, DC 20420, (757) 728-3381. This is not a toll-free number.

SUPPLEMENTARY INFORMATION: Under 38 U.S.C. 7431(e)(1)(A), not less often than once every two years, the Secretary must prescribe for Department of Veterans Affairs (VA)-wide applicability the minimum and maximum amounts of annual pay that may be paid to VHA physicians and dentists. Further, 38 U.S.C. 7431(e)(1)(B) allows the Secretary to prescribe separate minimum and maximum amounts of pay for a specialty or assignment. In construction of the annual pay ranges, 38 U.S.C. 7431(c)(4)(A) requires the consultation of two or more national surveys of pay for physicians and dentists, as applicable, whether prepared by private, public, or quasi-public entities in order to make a general assessment of the range of pays payable to physicians and dentists. Lastly, 38 U.S.C. 7431(e)(1)(C) states amounts prescribed under paragraph 7431(e) shall be published in the **Federal Register**, and shall not take effect until at least 60 days after date of publication.

Background

The "Department of Veterans Affairs Health Care Personnel Enhancement Act of 2004" (Pub. L. 108-445) was signed by the President on December 3, 2004. The major provisions of the law established a new pay system for VA's Veterans Health Administration (VHA) physicians and dentists consisting of base pay, market pay, and performance pay. While the base pay component is set by statute, market pay is intended to reflect the recruitment and retention needs for the specialty or assignment of a particular physician or dentist at a facility. Further, performance pay is intended to recognize the achievement of specific goals and performance objectives prescribed annually. These three components create a system of pay that is driven by both market indicators and employee performance, while recognizing employee tenure in VA.

Discussion

VA identified and utilized salary survey data sources which most closely represent VA comparability in the areas of practice setting, employment environment, and hospital/health care system. The Association of American Medical Colleges (AAMC), Hospital and Healthcare Compensation Service (HHCS), Sullivan, Cotter, and Associates (S&C), Medical Group Management Association (MGMA), Physician Executive Management Center (PEMC), and the Survey of Dental Practice published by the American Dental Association (ADA) were collectively utilized as benchmarks from which to prescribe annual pay ranges for physicians and dentists across the scope of assignments/specialties within VA. While aggregating the data, a preponderance of weight was given to those surveys which most directly resembled the environment of VA.

In constructing annual pay ranges to accommodate the more than forty physician and dentist specialties that currently exist in the VA system, VA continued the practice of grouping specialties into consolidated pay ranges. This allows VA to use multiple sources that yield a high number of physician salary data which helps to minimize disparities and aberrations that may surface from data involving smaller numbers of physicians and dentists for comparison and from sample change from year to year. Thus, by aggregating multiple survey sources into like groupings, greater confidence exists that the average compensation reported is truly representative. In addition, aggregation of data provides for a large enough sample size and provides pay ranges with maximum flexibility for pay setting for the more than 25,000 VHA physicians and dentists.

In developing the annual pay ranges, a few distinctive principles were factored into the compensation analysis of the data. The first principle is to ensure that both the minimum and maximum salary is at a level that accommodates special employment situations, from fellowships and medical research career development awards to Nobel Laureates, high-cost areas, and internationally renowned clinicians. The second principle, to attempt to establish a rate range of +/- 25 percent of the mean, is imperative to provide ranges large enough to accommodate career progression, geographic differences, sub-specialization, and special factors. This principle is also the standard recommended by World@Work for professional compensation ranges.

All clinical specialties for VHA physicians and dentists were reviewed against relevant private sector data. The specialties are grouped into five clinical pay ranges that reflect comparable complexity in salary, recruitment, and retention considerations. Two additional pay ranges apply to VHA Chiefs of Staff and physicians and dentists in executive level administrative assignments at the facility, network, or headquarters level.

PAY TABLE 1—CLINICAL SPECIALTY

Tier level	Minimum	Maximum
TIER 1	\$98,967	\$215,000
TIER 2	110,000	230,000
TIER 3	120,000	255,000

PAY TABLE 1—COVERED CLINICAL SPECIALTIES

Allergy and Immunology.
Compensation and Pension.
Endocrinology.
Geriatrics.
Infectious Diseases.
Internal Medicine/Primary Care/Family Practice.
Neurology.
Preventive Medicine.
Rheumatology.
General Practice—Dentistry.
Endodontics.
Periodontics.
Prosthodontics.
All other specialties or assignments that do not require a specific specialty.

PAY TABLE 2—CLINICAL SPECIALTY

Tier level	Minimum	Maximum
TIER 1	\$98,967	\$240,000
TIER 2	115,000	250,000
TIER 3	130,000	260,000

PAY TABLE 2—COVERED CLINICAL SPECIALTIES

Critical Care.
Emergency Medicine.
Gynecology.
Hematology—Oncology.
Hospitalist.
Nephrology.
Pathology.
PM&R/SCI.
Psychiatry.
Pulmonary.

PAY TABLE 3—CLINICAL SPECIALTY

Tier level	Minimum	Maximum
TIER 1	\$98,967	\$300,000
TIER 2	120,000	310,000
TIER 3	135,000	320,000

PAY TABLE 3—COVERED CLINICAL SPECIALTIES

Cardiology (Non-invasive).
Dermatology.
Gastroenterology.
Nuclear Medicine.
Ophthalmology.
Oral Surgery.
Otolaryngology.

PAY TABLE 4—CLINICAL SPECIALTY

Tier level	Minimum	Maximum
TIER 1	\$98,967	\$325,000
TIER 2	125,000	340,000
TIER 3	140,000	355,000

PAY TABLE 4—COVERED CLINICAL SPECIALTIES

Anesthesiology.
Cardiology (Invasive/Non-Interventional).
General Surgery.
Plastic Surgery.
Radiology (Non-Invasive).
Urology.
Vascular Surgery.

PAY TABLE 5—CHIEF OF STAFF

Tier level	Minimum	Maximum
TIER 1	\$150,000	\$300,000
TIER 2	145,000	280,000
TIER 3	140,000	260,000

PAY TABLE 5—COVERED ASSIGNMENTS

VHA Chiefs of Staff.
Deputy Chiefs of Staff (Complexity Level 1a and 1b facilities only).

PAY TABLE 6—EXECUTIVE ASSIGNMENTS

Tier level	Minimum	Maximum
TIER 1	\$145,000	\$265,000
TIER 2	145,000	245,000
TIER 3	130,000	235,000

PAY TABLE 6—COVERED EXECUTIVE ASSIGNMENTS

Principal Deputy Under Secretary for Health, Deputy Under Secretary for Health, Chief Officer, Network Director, Medical Center Director, Network Chief Officer, Executive Director, Assistant Deputy Under Secretary for Health, VA Central Office Chief Consultant, National Director, National Program Manager, and other VA Central Office Physician/Dentist.

PAY TABLE 7—CLINICAL SPECIALTY

Tier level	Minimum	Maximum
TIER 1	\$98,967	\$375,000
TIER 2	140,000	385,000

PAY TABLE 7—COVERED CLINICAL SPECIALTIES

Cardio-Thoracic Surgery.
Interventional Cardiology.
Interventional Radiology.
Neurosurgery.
Orthopedic Surgery.

Signing Authority: The Secretary of Veterans Affairs 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 A. McDonald, Secretary, Department of Veterans Affairs, approved this document on September 3, 2014, for publication.

Dated: September 12, 2014.

William F. Russo,
Deputy Director, Office of Regulation Policy & Management, Office of the General Counsel, U.S. Department of Veterans Affairs.

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DEPARTMENT OF VETERANS AFFAIRS

Genomic Medicine Program Advisory Committee; Notice of Meeting

The Department of Veterans Affairs (VA) gives notice under the Federal Advisory Committee Act, 5 U.S.C. App. 2 that the Genomic Medicine Program Advisory Committee will meet on October 10, 2014, at the U.S. Access Board at 1331 F Street NW., Suite 1000, Washington, DC. The meeting will convene at 9:00 a.m. and adjourn at 5:00 p.m. The meeting is open to the public. Anyone attending must show a valid photo ID to building security and be escorted to the meeting. Please allow 15 minutes before the meeting begins for this process.

The purpose of the Committee is to provide advice and make recommendations to the Secretary of Veterans Affairs on using genetic information to optimize medical care for Veterans and to enhance development of tests and treatments for diseases particularly relevant to Veterans.

The Committee will receive program updates and continue to provide insight into optimal ways for VA to incorporate genomic information into its health care program while applying appropriate ethical oversight and protecting the