

6 p.m.

Commission Chairman Closing

Remarks;

DFO adjourns the meeting.

Public's Accessibility to the Meeting:

Pursuant to 5 U.S.C. 552b and 41 CFR 102-3.140 through 102-3.165, and the availability of space, the October 21 and 22 meetings will be open to the public. Please note that the availability of seating is on a first-come basis.

Written Statements:

Pursuant to 41 CFR 102-3.105(j) and 102-3.140, and section 10(a)(3) of the Federal Advisory Committee Act of 1972, the public or interested organizations may submit written statements to the Commission about its mission and functions. Written statements may be submitted at any time or in response to the stated agenda of a planned meeting of the MLDC.

All written statements shall be submitted to the Designated Federal Officer for the Commission, and this individual will ensure that the written statements are provided to the membership for their consideration. Contact information for the Designated Federal Officer can be obtained from the **FOR FURTHER INFORMATION CONTACT** section of this notice or from GSA's FACA Database—<https://www.fido.gov/facadatabase/public.asp>.

Statements being submitted in response to the agenda mentioned in this notice must be received by the Designated Federal Officer at least five calendar days prior to the meeting which is the subject of this notice. Written statements received after this date may not be provided to or considered by the Commission until its next meeting.

The Designated Federal Officer will review all timely submissions with the MLDC Chairperson and ensure they are provided to all members of the Commission before the meeting that is the subject of this notice.

Dated: September 25, 2009.

**Patricia L. Toppings,**  
*OSD Federal Register Liaison Officer,*  
*Department of Defense.*

[FR Doc. E9-23742 Filed 9-30-09; 8:45 am]

**BILLING CODE 5001-06-P**

## DEPARTMENT OF DEFENSE

### Office of the Secretary

#### Military Health Risk Management Demonstration Project

**AGENCY:** Office of the Assistant Secretary of Defense for Health Affairs/ TRICARE Management Activity, Department of Defense.

**ACTION:** Notice of a Military Health Risk Management demonstration project.

**SUMMARY:** This notice is to advise interested parties of a Military Health System (MHS) demonstration project entitled "Military Health Risk Management Demonstration Project". This demonstration project, which will be available for participation by select non-Medicare eligible, retired TRICARE-eligible beneficiaries, and their family members, is designed to evaluate the efficacy of providing incentives to encourage healthy behaviors on the part of these MHS beneficiaries.

**DATES:** *Effective Date:* This demonstration will be effective from October 1, 2009, until February 28, 2012.

**FOR FURTHER INFORMATION CONTACT:** Dr. Barry Cohen, Director of Healthcare Operations—TRICARE Management Activity, 5111 Leesburg Pike, Suite 810, Falls Church, VA 22041-3206; telephone (703) 681-7515.

#### **SUPPLEMENTARY INFORMATION:**

##### **A. Background**

Health Risk Management involves utilizing a self-reported health risk assessment to identify areas where TRICARE beneficiaries may be at risk to develop certain chronic illnesses. The questionnaire covers a wide range of lifestyle behaviors and health issues. In addition, physiological and biometric measures such as blood pressure, glucose level, lipids, nicotine use, and weight are also considered to aid in determining the overall level of risk for chronic disease. This demonstration project will assess the effects of providing incentives along with wellness programs and healthy behaviors and lifestyle practices among non-Medicare-eligible retired beneficiaries and their family members who are enrolled in TRICARE Prime.

##### **B. National Defense Authorization Act (NDAA) for Fiscal Year 2009 (FY09) Military Health Risk Management Directive**

Section 712 of the NDAA for FY09 requires the Department to develop a wellness assessment to be offered to beneficiaries enrolled in the demonstration project. The wellness assessment will incorporate nationally recognized standards for health and healthy behaviors, will be offered to determine a baseline assessment, and will be repeated at appropriate intervals. The wellness assessment will include a self-reported health risk assessment, physiological, and biometric measures; including at least blood pressure,

glucose level, lipids, nicotine use and weight. Non-Medicare-eligible retired beneficiaries of the MHS and their dependents who are enrolled in TRICARE Prime and who reside in the demonstration project service areas will be offered the opportunity to enroll in the demonstration project. The demonstration project will be conducted in at least three geographic areas within the United States where TRICARE Prime is offered. The area covered by the project will be referred to as the demonstration project service area. Programs will be developed to assist enrollees to improve healthy behaviors, as identified by the wellness assessment. For the purpose of conducting the demonstration project, monetary and/or nonmonetary incentives will be offered to enrollees to encourage participation in the demonstration project.

##### **C. Description of Demonstration Project**

The Military Health Risk Management demonstration project will be conducted to evaluate whether monetary incentives in conjunction with wellness programs will encourage healthy behaviors among non-Medicare-eligible retired beneficiaries and their family members who are enrolled in TRICARE Prime and reside in the demonstration project service areas. The duration of the project will be approximately 3 years. There will be a monetary incentive award to enrollees for full participation in this project of an amount equivalent to 50 percent of the annual TRICARE Prime enrollment fee (\$230/family or \$115/individual).

For the purpose of this study, at least one demonstration project service area will encompass a military treatment facility (MTF), and the others will encompass areas supported exclusively by purchased care. The National Naval Medical Center, Medical Homes Program, Bethesda, MD, has been selected as the MTF demonstration project service area; the Designated Provider Programs at Martin's Point, Portland, ME, and CHRISTUS Health, Houston, TX, have been selected as the purchased care demonstration project service areas.

##### **D. Implementation**

Each site will be responsible for identifying a cohort of retired beneficiaries and their family members who are enrolled in TRICARE Prime and are non-Medicare-eligible to participate in the demonstration. Following the enrollment period, the site will maintain the demographic, clinical, and other data required to evaluate the effectiveness of the demonstration. The

service area sites will use a self-reported Health Risk Assessment (HRA) designed to screen and identify the participants' health risk factors and provide targeted interventions that help prevent, manage, and improve chronic conditions. They will perform all of the study participants' physiological and biometric measures, including at least blood pressure, glucose levels, lipids, nicotine use, and weight. The service area sites will schedule follow-up visits, encourage participants to take advantage of available online educational Web sites, and enroll in established wellness programs. They will also direct participants to retake the HRA/biometrics annually to reassess health behaviors and outcomes. A toll-free phone line will be available to answer questions regarding enrollment and monetary incentives from demonstration participants.

Dated: September 25, 2009.

**Patricia L. Toppings,**

*OSD Federal Register Liaison Officer,  
Department of Defense.*

[FR Doc. E9-23741 Filed 9-30-09; 8:45 am]

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## DEPARTMENT OF DEFENSE

### Office of the Secretary

#### Renewal of Department of Defense Federal Advisory Committees

**AGENCY:** Department of Defense (DoD).

**ACTION:** Renewal of Federal advisory committee.

**SUMMARY:** Under the provisions of the Federal Advisory Committee Act of 1972, (5 U.S.C. Appendix, as amended), the Government in the Sunshine Act of 1976 (5 U.S.C. 552b, as amended), and 41 CFR 102-3.50, the Department of Defense gives notice that it is renewing the charter for the Defense Task Force on Sexual Assault in the Military Services (hereafter referred to as the Task Force).

**FOR FURTHER INFORMATION CONTACT:** Jim Freeman, Deputy Committee Management Officer for the Department of Defense, 703-601-6128.

**SUPPLEMENTARY INFORMATION:** The Task Force, pursuant to Section 576 of Public Law 108-375, is a non-discretionary Federal advisory committee established to conduct an examination of matters relating to sexual assault by members or against members of the Armed Forces of the United States.

Pursuant to Section 576(e) of public Law 108-375, the Task Force, no later than one year after the initiation of its examination, shall submit to the

Secretary of Defense and the Secretaries of the Army, Navy and Air Force on the activities of the Department of Defense and the Armed Forces to respond to sexual assault.

The Task Force shall be comprised of no more than ten members and the membership shall be comprised of an equal number of DoD and civilian members.

The Secretary of Defense shall select the DoD Co-Chairperson, and the civilian members shall select a civilian Co-Chairperson.

Task Force members who are appointed by the Secretary of Defense, who are not full-time or permanent part-time Federal employees, shall be appointed as experts and consultants under the authority of 5 U.S.C. 3109 and serve as Special Government Employees. All members shall be appointed on an annual basis for the duration of the Task Force.

Task Force members who are Federal officers or employees shall serve without compensation (other than compensation to which they are entitled to as Federal officers or employees).

Other Task Force members shall be appointed under the authority of 5 U.S.C 3161 and will receive compensation for their service. All Task Force members shall receive compensation for travel and per diem for official Task Force travel.

With DoD approval, the Task Force is authorized to establish subcommittees, as necessary and consistent with its mission. These subcommittees or working groups shall operate under the provisions of the Federal Advisory Committee Act of 1972, the Government in the Sunshine Act of 1976 (5 U.S.C 552B, as amended), and other appropriate Federal regulations.

Such subcommittees or workgroups shall not work independently of the chartered Task Force, and shall report all their recommendations and advice to the Task Force for full deliberation and discussion. Subcommittees or workgroups have no authority to make decisions on behalf of the chartered Task Force nor can they report directly to the Department of Defense or any Federal officers or employees who are not Task Force members.

Subcommittee members, who are not Task Force members, shall be appointed in the same manner as the Task Force members.

The Task Force shall meet at the call of the Task Force's Designated Federal Officer, in consultation with the Chairperson. The estimated number of Task Force meetings is six per year.

The Designated Federal Officer, pursuant to DoD policy, shall be a full-

time or permanent part-time DoD employee, and shall be appointed in accordance with established DoD policies and procedures. In addition, the Designated Federal Officer is required to be in attendance at all meetings, however, in the absence of the Designated Federal Officer, the Alternate Designated Federal Officer shall attend the meeting.

Pursuant to 41 CFR 102-3.105(j) and 102-3.140, the public or interested organizations may submit written statements to the Defense Task Force on Sexual Assault in the Military Services membership about the Task Forces' mission and functions. Written statements may be submitted at any time or in response to the stated agenda of planned meeting of the Defense Task Force on Sexual Assault in the Military Services.

All written statements shall be submitted to the Designated Federal Officer for the Defense Task Force on Sexual Assault in the Military Services, and this individual will ensure that the written statements are provided to the membership for their consideration. Contact information for Defense Task Force on Sexual Assault in the Military Services' Designated Federal Officer can be obtained from the GSA's FACA Database—<https://www.fido.gov/facadatabase/public.asp>.

The Designated Federal Officer, pursuant to 41 CFR 102-3.150, will announce planned meetings of the Defense Task Force on Sexual Assault in the Military Services. The Designated Federal Officer, at that time, may provide additional guidance on the submission of written statements that are in response to the stated agenda for the planned meeting in question.

Dated: September 28, 2009.

**Patricia L. Toppings,**

*OSD Federal Register Liaison Officer,  
Department of Defense.*

[FR Doc. E9-23739 Filed 9-30-09; 8:45 am]

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## DEPARTMENT OF DEFENSE

### Office of the Secretary

#### TRICARE; Civilian Health and Medical Program of the Uniformed Services (CHAMPUS); Fiscal Year 2010 Diagnosis Related Group (DRG) Updates

**AGENCY:** Office of the Secretary, DoD.

**ACTION:** Notice of DRG revised rates.

**SUMMARY:** This notice describes the changes made to the TRICARE DRG-based payment system in order to