

11) detailing the waiver process and discussing the information that hospitals must provide in requesting a waiver. We indicated that upon receipt of a waiver request, we would publish a **Federal Register** notice to solicit public comments, as required by section 1138(a)(2)(D) of the Act.

According to these requirements, we will review the request and comments received. During the review process, we may consult on an as-needed basis with the Public Health Service's Division of Transplantation, the United Network for Organ Sharing, and our regional offices. If necessary, we may request additional clarifying information from the applying hospital or others. We will then make a final determination on the waiver request and notify the hospital and the designated and requested OPOs.

III. Hospital Waiver Request

[If you choose to comment on issues in this section, please include the caption "Hospital Waiver Request" at the beginning of your comments.]

As permitted by 42 CFR 486.308(e), Methodist Hospital, of Henderson, Kentucky has requested a waiver in order to enter into an agreement with a designated OPO other than the OPO designated for the service area in which the hospital is located.

Methodist Hospital is requesting a waiver to work with: Kentucky Organ Donor Affiliates, 106 East Broadway, Louisville, Kentucky 40202.

Methodist Hospital's Designated OPO is: Indiana Organ Procurement Organization, 429 N. Pennsylvania, Suite 201, Indianapolis, Indiana 46204.

Authority: Section 1138 of the Social Security Act (42 U.S.C. 1320b-8). (Catalog of Federal Domestic Assistance Program No. 93.773, Medicare—Hospital Insurance; Program No. 93.774, Medicare—Supplementary Medical Insurance, and Program No. 93.778, Medical Assistance Program)

Dated: February 15, 2007.

Leslie V. Norwalk,

Acting Administrator, Centers for Medicare & Medicaid Services.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS-1553-N]

Medicare Program; Notice of Supplemental Election Period for Provider Participation in the Calendar Year (CY) 2007 Competitive Acquisition Plan for Part B Drugs

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

ACTION: Notice.

SUMMARY: This notice announces an additional physician election period for physicians who are not currently participating in the competitive acquisition program (CAP) for Medicare Part B drugs for calendar year (CY) 2007. The additional physician election period begins on May 1, 2007 and ends on June 15, 2007. Physicians who elect to join the CAP during this additional election period will enter into a physician election agreement effective August 1, 2007 through December 31, 2007.

DATES: The additional CAP physician election period will begin on May 1, 2007 and end on June 15, 2007. Physicians electing to join the CAP during this period will participate in the CAP effective August 1, 2007.

FOR FURTHER INFORMATION CONTACT: Edmund Kasaitis (410) 786-4545.

SUPPLEMENTARY INFORMATION:

I. Background

The Medicare Prescription Drug, Improvement, and Modernization Act of 2003 (Pub. L. 108-173) (MMA) requires the implementation of a competitive acquisition program (CAP) for certain Medicare Part B drugs not paid on a cost or prospective payment system basis. Physicians who elect to participate in the CAP obtain Medicare covered drugs from vendors selected through a competitive bidding process. Physicians who do not elect to participate in the CAP purchase these drugs and are paid under the average sales price (ASP) system. (For more information on the CAP, see the March 4, 2005 proposed rule (70 FR 10746), July 6, 2005 interim final rule with comment period (70 FR 39022), and November 21, 2005 final rule (70 FR 70116).) In accordance with the CAP statute and regulations, the regular, annual CAP physician election period for CY 2008 will occur in the fall of 2007.

II. Provisions of the Notice

Under the authority described in section 1847B(a)(5)(A)(i) of Social Security Act (the Act) and § 414.908(a)(2) of our regulations, which allows for physician election at times other than the regular, annual election period in such exigent circumstances as defined by CMS, we are designating an additional election period for physicians who wish to join the CAP. We are providing for this additional election period in recognition of the statutory change to the CAP under division B, title I, section 108 of the Tax Relief and Health Care Act of 2006 (Pub. L. 109-432) (TRHCA), effective for drugs supplied under the CAP as of April 1, 2007. We expect to provide program instructions or other guidance in the near future to implement changes to the CAP resulting from the new statutory provisions. Although the statutory change does not directly affect participating CAP physicians, it will require additional implementation efforts by CMS and was enacted after the close of the CAP physician election period for CY 2007. Thus, we believe this is an "exigent circumstance" for which we should allow physicians an additional opportunity to join the CAP.

The additional election period—

- Begins May 1, 2007 and end June 15, 2007; and
- Is only for physicians as defined in section 1861(r) of the Act who are not currently participating in the CY 2007 CAP.

The procedures and forms used for the regular, annual election period for CY 2007 also will be used for this additional CY 2007 election period. The aforementioned forms include the Competitive Acquisition Program (CAP) for Medicare Part B Drugs CAP Physician Election Agreement, which is currently approved under the Office of Management and Budget control number 0938-0987, with an expiration date of April 30, 2009. Physicians who wish to join the CAP during this election period may obtain a Physician Election Agreement form from the download section of the CAP Information for Physicians webpage on the CMS Web site at http://www.cms.hhs.gov/CompetitiveAcquisforBios/02_infophys.asp#TopOfPage.

Physicians who elect to participate in the CAP during the additional CY 2007 election period will have their CAP election agreement effective from August 1, 2007 through December 31, 2007. We note that participation in the CAP for CY 2008 requires renewal of CAP election during the regular fall

election period, which will run from October 1, 2007 to November 15, 2007.

Completed and signed forms must be returned by mail to the physician's local carrier (the carrier that processes the physician's Part B claims). Forms must be postmarked no later than June 15, 2007. Additional details about CAP physician election will be available on the CMS Web site at http://www.cms.hhs.gov/CompetitiveAcquisforBios/02_infophys.asp#TopOfPage.

Authority: Section 1847B(a)(5)(A)(i) of the Social Security Act (42 U.S.C.) (No. 93.774, Medicare—Supplementary Medical Insurance Program).

Dated: February 15, 2007.

Leslie V. Norwalk,

Acting Administrator, Centers for Medicare & Medicaid Services.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS-1544-N]

Program; Public Meetings in Calendar Year 2007 for All New Public Requests for Revisions to the Healthcare Common Procedure Coding System (HCPCS) Coding and Payment Determinations

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

ACTION: Notice.

SUMMARY: This notice announces the dates, time, and location of the Healthcare Common Procedure Coding System (HCPCS) public meetings to be held in calendar year 2007 to discuss our preliminary coding and payment determinations for all new public requests for revisions to the HCPCS. These meetings provide a forum for interested parties to make oral presentations or to submit written comments in response to preliminary coding and payment determinations. Discussion will be directed toward responses to our specific preliminary recommendations and will include all items on the public meeting agenda.

DATES: *Meeting Dates:* The following are the 2007 HCPCS public meeting dates:

1. Tuesday, May 1, 2007, 9 a.m. to 5 p.m., e.s.t. (Supplies and Other)
2. Wednesday, May 2, 2007, 9 a.m. to 5 p.m., e.s.t. (Supplies and Other)
3. Thursday, May 3, 2007, 9 a.m. to 5 p.m., e.s.t. (Durable Medical Equipment (DME) and Accessories).

4. Tuesday, May 15, 2007, 9 a.m. to 5 p.m., e.s.t. (Drugs/Biologicals/Radiopharmaceuticals/Radiologic Imaging Agents)

5. Wednesday, May 16, 2007, 9 a.m. to 5 p.m., e.s.t. (Drugs/Biologicals/Radiopharmaceuticals/Radiologic Imaging Agents)

6. Tuesday, May 22, 2007, 9 a.m. to 5 p.m., e.s.t. (Orthotics and Prosthetics)

7. Wednesday, May 23, 2007, 9 a.m. to 5 p.m., e.s.t. (Orthotics and Prosthetics)

The product category reported by the meeting participant may not be the same as that assigned by CMS. All meeting participants are advised to review the public meeting agenda at <http://www.cms.hhs.gov/medhpcsgeninfo> which identifies our category determinations, and the dates each item will be discussed. Draft agendas, including a summary of each request and CMS' preliminary decision will be posted on our HCPCS Web site at <http://www.cms.hhs.gov/medhpcsgeninfo> at least 1 month before each meeting.

Registration Deadlines: Individuals must register for each date they plan either to attend or to provide a presentation. For the May 1, 2, and 3, 2007 public meeting dates, the deadline for registration is April 24, 2007; for the May 15 and 16, 2007 public meeting, the deadline for registration is May 8, 2007; for the May 22 and 23, 2007 public meetings, the deadline for registration is May 15, 2007.

Deadlines for Submission of Supporting Material: The deadline for submitting materials and writings that will be used in support of an oral presentation are: Public meetings held on May 1, 2, and 3, 2007, the deadline is April 17, 2007; public meetings held on May 15 and 16, 2007, the deadline is May 1, 2007; public meeting held on May 22 and 23, 2007, the deadline is May 8, 2007.

ADDRESSES: *Meeting Location:* The public meetings will be held in the main auditorium of the central building of the Centers for Medicare and Medicaid Services, 7500 Security Boulevard, Baltimore, MD 21244-1850

Registration and Special Accommodations: Individuals wishing to participate or who need special accommodations or both must register by completing the on-line registration located at <http://www.cms.hhs.gov/medhpcsgeninfo>; or by contacting Felicia Eggleston at (410)786-9287; felicia.eggleston@cms.hhs.gov or Gloria Knight at (410)786-4598; Gloria.Knight@cms.hhs.gov, for the meetings for May 1, May 2, May 3, 2007 meetings.

For the May 15, May 16, May 22, and May 23, 2007 meetings, contact Jennifer Carver at (410)786-6610; Jennifer.Carver@cms.hhs.gov or Trish Brooks at (410)786-4561; Trish.Brooks@cms.hhs.gov.

FOR FURTHER INFORMATION CONTACT:

Jennifer Carver, 410-786-6610 or Jennifer.carver@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). The procedures and public meetings announced in this notice for new DME are in response to the mandate of section 531(b) of BIPA.

We published a notice in the November 23, 2001 **Federal Register** (66 FR 58743) providing information regarding the establishment of the public meeting process for DME. It is our intent to distribute any materials submitted to CMS to the HCPCS workgroup members for their consideration. CMS and the HCPCS workgroup members require sufficient preparation time to review all relevant materials. For this reason, our HCPCS Public Meeting Coordinators will only accept and review presentation materials received by the deadline for each public meeting, as specified in the **DATES** section. Therefore, we are implementing a 10-page submission limit and firm deadlines for receipt of any materials and presentations the meeting participant wishes CMS to consider.

The public meeting process provides an opportunity for the public to become aware of coding changes under consideration, as well as an opportunity for CMS to gather public input.

II. Meeting Registration

The following information must be provided when registering: Name, company name and address, telephone and fax numbers, e-mail address, and special needs information. A CMS staff member will confirm your registration by mail, e-mail, or fax.

A. Registration Process for Primary Speakers

Individuals must also indicate whether they are the "primary speaker"