

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**
**Centers for Medicare & Medicaid Services**
**[CMS-5033-N5]**
**Medicare Program; Meeting of the Advisory Board on the Demonstration of a Bundled Case-Mix Adjusted Payment System for End-Stage Renal Disease Services—July 14 Through July 15, 2005**
**AGENCY:** Centers for Medicare & Medicaid Services (CMS), HHS.

**ACTION:** Notice.

**SUMMARY:** This notice announces the third public meeting of the Advisory Board on the Demonstration of a Bundled Case-Mix Adjusted Payment System for End-Stage Renal Disease (ESRD) Services. Notice of this meeting is required by the Federal Advisory Committee Act (5 U.S.C. App. 2, section 10(a)(1) and (a)(2)). The Advisory Board will provide advice and recommendations with respect to the establishment and operation of the demonstration mandated by section 623(e) of the Medicare Prescription Drug, Improvement, and Modernization Act of 2003.

**DATES:** The meeting is on Thursday, July 14, 2005, from 9 a.m. to 5 p.m., eastern standard time and Friday, July 15, 2005, from 9 a.m. to 3 p.m. eastern standard time.

*Special Accommodations:* Persons attending the meeting, who are hearing or visually impaired, or have a condition that requires special assistance or accommodations, are asked to notify Pamela Morrow by July 7, 2005, by e-mail at [ESRDAdvisoryBoard@cms.hhs.gov](mailto:ESRDAdvisoryBoard@cms.hhs.gov) or by telephone at (410) 786-2461.

**ADDRESSES:** The meeting will be held at the Marriott Hotel—BWI Airport, 1743 West Nursery Rd., Baltimore, MD 21240. Attendance is limited to the space available, so seating will be on a first come, first served basis.

*Web site:* Up-to-date information on this meeting is located at <http://www.cms.hhs.gov/faca/esrd>.

*Hotline:* Up-to-date information on this meeting is located on the CMS Advisory Committee Hotline at 1 (877) 449-5659 (toll free) or in the Baltimore area at (410) 786-9379.

**FOR FURTHER INFORMATION CONTACT:** Pamela Morrow by e-mail at [ESRDAdvisoryBoard@cms.hhs.gov](mailto:ESRDAdvisoryBoard@cms.hhs.gov) or telephone at (410) 786-2461.

**SUPPLEMENTARY INFORMATION:** On June 2, 2004, we published a **Federal Register** notice requesting nominations for individuals to serve on the Advisory Board on the Demonstration of a Bundled Case-Mix Adjusted Payment System for End-Stage Renal Disease (ESRD) Services. The June 2, 2004, notice also announced the establishment of the Advisory Board and the signing by the Secretary on May 11, 2004, of the charter establishing the Advisory Board. On January 28, 2005, we published a **Federal Register** notice announcing the appointment of eleven individuals to serve as members of the Advisory Board on the Demonstration of a Bundled Case-Mix Adjusted Payment System for ESRD Services, including one individual to serve as co-chairperson, and one additional co-chairperson, who is employed by CMS. The first public meeting of the Advisory Board was held on February 16, 2005. The second public meeting of the Advisory Board was held on May 24, 2005. This notice announces the third public meeting of this Advisory Board.

**I. Topics of the Advisory Board Meeting**

The Advisory Board on the Demonstration of a Bundled Case-Mix Adjusted Payment System for ESRD Services will study and make recommendations on the following issues:

- The drugs, biologicals, and clinical laboratory tests to be bundled into the demonstration payment rates.
- The method and approach to be used for the patient characteristics to be included in the fully case-mix adjusted demonstration payment system.
- The manner in which payment for bundled services provided by non-demonstration providers should be handled for beneficiaries participating in the demonstration.
- The feasibility of providing financial incentives and penalties to organizations operating under the demonstration that meet or fail to meet applicable quality standards.
- The specific quality standards to be used.
- The feasibility of using disease management techniques to improve quality and patient satisfaction and reduce costs of care for the beneficiaries participating in the demonstration.
- The selection criteria for demonstration organizations.

**II. Procedure and Agenda of the Advisory Board Meeting**

This meeting is open to the public. The Advisory Board will hear

background presentations from CMS. The Advisory Board will then deliberate openly on the general topic and will make recommendations on specific topics for future meetings. The Advisory Board will also allow at least a 30-minute open public session. Interested parties may speak or ask questions during the public comment period. Comments may be limited by the time available. Written questions should be submitted by July 7, 2005, to [ESRDAdvisoryBoard@cms.hhs.gov](mailto:ESRDAdvisoryBoard@cms.hhs.gov). Parties may also submit written comments following the meeting to the contact listed under the **FOR FURTHER INFORMATION CONTACT** section of this notice.

**Authority:** 5 U.S.C. App. 2, section 10(a). (Catalog of Federal Domestic Assistance Program No. 93.774, Medicare—Supplementary Medical Insurance Program)

Dated: June 16, 2005.

**Mark B. McClellan,**

*Administrator, Centers for Medicare & Medicaid Services.*

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**
**Administration for Children and Families**
**Submission for OMB Review; Comment Request**
**Adoption and Foster Care Analysis and Reporting System for Title IV-B and Title IV-E**

*OMB No.:* 0980-0267.

*Description:* Section 479 of title IV-E of the Social Security Act directs States to establish and implement an adoption and foster care reporting system. The data are used for a number of reasons, including responding to Congressional requests for current data on children in foster care or those who have been adopted; responding to questions and requests from other Federal departments and agencies; trend analyses and short- and long-term planning; targeting areas for greater or potential technical assistance efforts; and determining and assessing outcomes for children and families.

*Respondents:* States, the District of Columbia and Puerto Rico.