

Insurance, and Program No. 93.774, Medicare—Supplementary Medical Insurance Program)

Dated: June 5, 2003.

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*Administrator, Centers for Medicare & Medicaid Services.*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Medicare & Medicaid Services

[CMS-1254-N]

#### Medicare Program; Meeting of the Advisory Panel on Ambulatory Payment Classification Groups—February 18, 19, and 20, 2004

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

**ACTION:** Notice of meeting.

**SUMMARY:** In accordance with section 10(a) of the Federal Advisory Committee Act (FACA) (5 U.S.C. Appendix 2), this notice announces the first biannual meeting of the Advisory Panel on Ambulatory Payment Classification (APC) Groups (the Panel) for 2004.

The purpose of the Panel is to review the APC groups and their associated weights and to advise the Secretary of Health and Human Services (the Secretary) and the Administrator of the Centers for Medicare & Medicaid Services (CMS) (the Administrator) concerning the clinical integrity of the APC groups and their associated weights. The Secretary and Administrator consider the Panel's advice as CMS prepares its annual updates of the hospital outpatient prospective payment system (OPPS) through rulemaking.

**DATES:** The first biannual meeting for 2004 is scheduled for February 18, 19, and 20, 2004, from 8 a.m. to 5 p.m. (EST).

**ADDRESSES:** The meeting will be held in the Multipurpose Room, 1st Floor, at the CMS Central Office, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

**FOR FURTHER INFORMATION CONTACT:** For copies of the charter, inquiries regarding these meetings, meeting registration, and submission of oral presentations or written agenda items, contact Shirl Ackerman-Ross, the meeting

coordinator and Designated Federal Official, FACA; CMS, Center for Medicare Management, Hospital Ambulatory Policy Group, Division of Outpatient Care; 7500 Security Boulevard, Mail Stop C4-05-17; Baltimore, MD 21244-1850 or phone (410) 786-4474. Also, please refer to the CMS Advisory Committees' Information Line at 1-877-449-5659 (toll free) and (410) 786-9379 (local).

For additional information on the APC meeting agenda topics and/or updates to the Panel's activities, search our Internet Web site: <http://www.cms.hhs.gov/faca/apc/default.asp>.

To submit a request for a copy of the charter, search the Internet at <http://www.cms.hhs.gov/faca> or e-mail [SAckermannross@cms.hhs.gov](mailto:SAckermannross@cms.hhs.gov).

Written materials may also be sent electronically to [outpatientpps@cms.hhs.gov](mailto:outpatientpps@cms.hhs.gov).

News media representatives should contact our Public Affairs Office at (202) 690-6145.

#### SUPPLEMENTARY INFORMATION:

##### I. Background

The Secretary of the Department of Health and Human Services (the Secretary) is required by section 1833(t)(9)(A) of the Social Security Act (the Act) to establish and consult with an expert, outside advisory panel on Ambulatory Payment Classification (APC) groups. The Advisory Panel on Ambulatory Payment Classification Groups (the Panel) meets up to three times annually to review the APC groups and to provide technical advice to the Secretary and to the Administrator of the Centers for Medicare & Medicaid Services (CMS) (the Administrator) concerning the clinical integrity of the groups and their associated weights. We will consider the technical advice provided by the Panel as we prepare the proposed rule that proposes changes to the Outpatient Prospective Payment System (OPPS) for the next calendar year.

The Panel may consist of a chair up to 15 members. These members must be representatives of Medicare Providers who are subject to OPPS and they may not be consultants. Panel members must have technical expertise that will enable them to participate fully in the work of the panel and must be currently employed full-time in their area of expertise. The Administrator selected the Panel membership based upon either self-nominations or nominations submitted by providers or organizations.

The Panel presently consists of the following members and a Chair (Vacant):

- Marilyn Bedell, M.S., R.N., O.C.N.

- Geneva Craig, R.N., M.A.
- Lora DeWald, M.Ed.
- Albert Brooks Einstein, Jr., M.D.
- Robert E. Henkin, M.D.
- Lee H. Hilborne, M.D., M.P.H.
- Stephen T. House, M.D.
- Frank G. Opelka, M.D., F.A.C.S.
- Kathleen Kinslow, C.R.N.A., Ed.D.
- Mike Metro, R.N., B.S.
- Gerald V. Naccarelli, M.D.
- Beverly K. Philip, M.D.
- Lynn R. Tomascik, R.N., M.S.N., C.N.A.A.

- Timothy Gene Tyler, Pharm.D.
- William Van Decker, M.D.

The agenda for the February 2004 meeting will provide for discussion and comment on the following topics:

- Reconfiguration of APCs (for example, splitting of APCs, moving Healthcare Common Procedure Coding System (HCPCS) codes from one APC to another and moving HCPCS codes from New Technology APCs to Clinical APCs).

- Evaluation of APC weights.
- Packaging devices and drug costs into APCs: methodology, effect on APCs, and need for reconfiguring APCs based upon device and drug packaging.

- Removal of procedures from the inpatient list for payment under the OPPS.

- Use of single and multiple procedure claims data.
- Packaging of HCPCS codes.
- Other technical issues concerning APC structure.

We are soliciting comments from the public on specific agenda items falling within these agenda topics for the February 2004 Panel meeting. We will consider specific agenda items for this meeting if they are submitted in writing and fall within the agenda topics listed above. We urge those who wish to comment to send comments as soon as possible but no later than 5 p.m. (EST), Friday, February 6, 2004.

The meeting is open to the public, but attendance is limited to the space available. Individuals or organizations wishing to make 5-minute oral presentations should contact the meeting coordinator by 5 p.m. (EST), Friday, February 6, 2004, in order to be scheduled. The number of oral presentations may be limited by the time available. Oral presentations must not exceed 5 minutes and may be further limited by the Chair due to quantity of presentations.

Persons wishing to make oral presentations must submit a copy of the presentation and the name, address, and telephone number of the presenter. In addition, all presentations must contain, at a minimum, the following supporting information and data: