website at *www.hcfa.gov/audience/planprov.htm* by June 26, 2002.

New DME: This meeting is open to the general public. The on-site check-in for visitors who have registered to attend the meeting will be held from 7:30 a.m. to 8 a.m., followed by opening remarks. The purpose of the open meeting is to allow the public an opportunity, in a public forum, to do the following:

- Present to CMS representatives information and recommendations regarding the coding requests listed on the agenda.
- Discuss with representatives of the HCPCS Workgroup its preliminary recommendation regarding these coding requests.
- Discuss preliminary recommendations of CMS regarding payment for new DME items.

For each item on the agenda, the discussion will begin with CMS's presenting an overview of the request and the factors we considered in reaching our preliminary recommendations. Following the CMS overview, the entity that requested the HCPCS coding change will be given a maximum of 15 minutes to make a public presentation concerning its coding change application and payment for the item. For a requestor to participate in the public meeting as a primary presenter, the requestor must be registered with the HCPCS Coordinator, Kaye Riley, (410) 786–5323. For purposes of registering as a primary presenter, you must, at least 15 days prior to the meeting, submit the following to the HCPCS coordinator:

- A brief statement, one to two pages, of the general nature of the information you plan to present.
- The names and addresses of the proposed presenters.
- An estimate of the time required to make the presentation.

Primary presenters will be given up to 15 minutes for their presentations. Other presenters will be permitted to sign up at the meeting on a first come basis to make 5-minute presentations on agenda items. Time constraints will determine how many presenters, besides the primary presenter, will be allowed to make a public presentation. Speakers following the primary presenters will also be required to submit on the day of the meeting a one to two-page summary of their presentation. Other persons in attendance, who do not have the opportunity to make a presentation, may, at the meeting, submit their comments in a written statement of one to two typed pages.

We will request that speakers declare at the meeting and in any written statements whether or not they have any financial involvement with manufacturers of any items or services being discussed (or with their competitors). This would include any payment, salary, remuneration, or benefit provided to the speaker by the manufacturer. A summary of each meeting will be posted on the HCPCS website within 3 weeks following the meeting. The HCPCS website is *http://www.hcfa.gov/medicare/hcpcs.htm.*

The DME public meetings will be held in the main auditorium at CMS's Central Office, located at 7500 Security Boulevard, Baltimore, MD, 21244. The first meeting is scheduled for March 11, 2002. For the remainder of 2002, meetings are also scheduled for May 13 and June 17. The meetings will begin at 8 a.m., E.S.T. For a coding request to be included on the agenda for the May or June meeting, it must received by April 1. For a coding request to be included on the agenda for the March meeting, it must be received at least 45 days before the scheduled date of the March meeting. If a coding request does not meet this deadline, it will be placed on the agenda for the next meeting.

The agenda for an upcoming DME public meeting will be posted on the HCPCS website at least 30 days before the scheduled date for the meeting. Posted with the agenda, there will also be a fact sheet, as described above, for each coding request to be reviewed at the meeting.

Authority: Sections 1102 and 1871 of the Social Security Act (42 U.S.C. 1302 and 42 U.S.C. 1395hh).

(Catalog of Federal Domestic Assistance Program No. 93.774, Medicare—Supplementary Medical Insurance Program)

Dated: November 19, 2001.

Thomas A. Scully,

Administrator, Centers for Medicare & Medicaid Services.

[FR Doc. 01–29326 Filed 11–21–01; 8:45 am]

BILLING CODE 4120–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

Arthritis Advisory Committee; Notice of Meeting

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

This notice announces a forthcoming meeting of a public advisory committee of the Food and Drug Administration (FDA). At least one portion of the meeting will be closed to the public.

General Function of the Committee: To provide advice and recommendations to the agency on FDA's regulatory issues.

Date and Time: The meeting will be held on December 7, 2001, from 8 a.m. to 5 p.m.

Location: CDER Advisory Committee conference room 1066, 5630 Fishers Lane, Rockville, MD.

Contact: Kathleen Reedy or LaNise Giles, Center for Drug Evaluation and Research (HFD–21), Food and Drug Administration, 5600 Fishers Lane, (for express delivery, 5630 Fishers Lane, rm. 1093) Rockville, MD 20857, 301–827–7001, FAX: 301–827–6776 or e-mail: reedyk@cder.fda.gov, or FDA Advisory Committee Information Line, 1–800–741–8138 (301–443–0572 in the Washington, DC area), code 12532. Please call the Information Line for up-to-date information on this meeting.

Agenda: The meeting will be open to the public from 8 a.m. to 9 a.m., unless public participation does not last that long, from 9 a.m. to 5 p.m., the meeting will be closed to permit discussion and review of trade secret and/or confidential information.

Procedure: On December 7, 2001, from 8 a.m. to 9 a.m., the meeting will open to the public. Interested persons may present data, information, or views, orally or in writing, on issues pending before the committee. Written submissions may be made to the contact person by November 17, 2001. Oral presentations from the public will be scheduled between approximately 8 a.m. and 9 a.m. Time allotted for each presentation may be limited. Those desiring to make formal oral presentations should notify the contact person before November 17, 2001, and submit a brief statement of the general nature of the evidence or arguments they wish to present, the names and addresses of proposed participants, and an indication of the approximate time requested to make their presentation.

FDA regrets that it was unable to publish this notice 15 days prior to the December 7, 2001, Arthritis Advisory Committee meeting. Because the agency believes there is some urgency to bring this issue to public discussion and qualified members of the Arthritis Advisory Committee were available at this time, the Commissioner of Food and Drugs concluded that it was in the public interest to hold this meeting even if there was not sufficient time for the customary 15-day public notice.

Closed Committee Deliberations: On December 7, 2001, from 9 a.m. to 5 p.m., the meeting will be closed to permit

discussion and review of trade secret and/or confidential information (5 U.S.C. 552b(c)(4)).

Notice of this meeting is given under the Federal Advisory Committee Act 5 U.S.C. app. 2).

Dated: November 15, 2001.

Linda A. Suydam,

Senior Associate Commissioner.

[FR Doc. 01–29225 Filed 11–21–01; 8:45 am]

BILLING CODE 4160–01–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

Blood Products Advisory Committee; Notice of Meeting

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

This notice announces a forthcoming meeting of a public advisory committee of the Food and Drug Administration (FDA). The meeting will be open to the public.

Name of Committee: Blood Products Advisory Committee.

General Function of the Committee: To provide advice and recommendations to the agency on FDA's regulatory issues.

Date and Time: The meeting will be held on December 13, 2001, from 8 a.m. to 5:30 p.m. and on December 14, 2001, from 8 a.m. to 3:30 p.m.

Location: Hilton Silver Spring Hotel, 8727 Colesville Rd., Silver Spring, MD.

Contact: Linda A. Smallwood, Center for Biologics Evaluation and Research (HFM–302), Food and Drug Administration, 1401 Rockville Pike, Rockville, MD 20852, 301–827–3514, or FDA Advisory Committee Information Line, 1–800–741–8138 (301–443–0572 in the Washington, DC area), code 19516. Please call the Information Line for up-to-date information on this meeting.

Agenda: On December 13, 2001, the following committee updates are tentatively scheduled: Transmissible spongiform encephalopathies (TSE) guidance, Centers for Disease Control and Prevention workshop on factor VIII, update on disaster response, and compliance quality control oversight. In the morning, the committee will hear presentations, discuss and make recommendations on potential concerns for simian foamy virus (SFV) transmission by blood and blood products. In the afternoon, the committee will hear presentations, discuss and make recommendations on the leukocyte reduction guidance. On December 14, 2001, the committee will hear presentations and discuss and make recommendations on human cells, tissues and cellular and tissue-based products: Risk factors for semen donation.

Procedure: Interested persons may present data, information, or views, orally or in writing, on issues pending before the committee. Written submissions may be made to the contact person by December 3, 2001. Oral presentations from the public will be scheduled between approximately 12 noon and 12:30 p.m., and between approximately 3:45 p.m. and 4:45 p.m. on December 13, 2001; and between approximately 11:30 a.m. and 1 p.m. on December 14, 2001. Time allotted for each presentation may be limited. Those desiring to make formal oral presentations should notify the contact person before December 3, 2001, and submit a brief statement of the general nature of the evidence or arguments they wish to present, the names and addresses of proposed participants, and an indication of the approximate time requested to make their presentation.

Notice of this meeting is given under the Federal Advisory Committee Act (5 U.S.C. app. 2).

Dated: November 15, 2001.

Linda A. Suydam,

Senior Associate Commissioner.

[FR Doc. 01–29226 Filed 11–21–01; 8:45 am]

BILLING CODE 4160–01–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Service Administration

Community Mental Health Services and Substance Abuse Prevention and Treatment Block Grant Maintenance of Effort Requirements: Exclusion from Future Year Calculations

In keeping with SAMHSA's delegation of authority from the Secretary for Health and Human Services (HHS) and in compliance with section 1915(b)(2) and section 1930(b) of the Public Health Service (PHS) Act as amended by Public Law 106–310, the Substance Abuse and Mental Health Services Administration published a guidance in the **Federal Register** (66 FR 35658) on July 6, 2001, to be used in determining whether to approve the exclusion of certain expenditures from aggregate expenditures used by the State in calculating the maintenance of effort requirement under the Community Mental Health Services (CMHS) Block Grant program and/or the Substance Abuse Prevention and Treatment (SAPT) Block Grant program.

In implementing the guidance, SAMHSA has learned that there was an unintendedly harsh consequence as a result of our stating that the funds to be excluded had to be appropriated by the State after the date of enactment of Public Law 106–310, October 17, 2000, which contained the new authority permitting the exclusion of certain expenditures. The intention of the requirement was to ensure that the new statutory authority was not applied retroactively, contrary to our understanding of the intent of the provision. In using the term ''appropriated,'' however, the agency inadvertently also eliminated consideration of funds that were appropriated by those States whose fiscal year 2001 began before October 17, 2000, the date of enactment of Public Law 106–310, thus creating an inequitable situation. Changing the language of the guidance to the date of expenditure rather than appropriation addresses both the issue of retroactive application and equitability.

Accordingly, we are revising the guidance by substituting in the second element of the guidance the word ''expended'' for the word ''appropriated.'' Thus funds that were appropriated by the State prior to October 17, 2000 but had not yet been expended may, in the discretion of the Administrator of SAMHSA, be considered for an exclusion.

Thus the guidance is now as follows:

''In order for SAMHSA to approve a request from a State to have excluded from the aggregate State expenditures funds appropriated by the State legislature to the principal agency for authorized activities which are of a non-recurring nature and for a specific purpose, the following is necessary:

1. The State shall request the exclusion separately from the application;

2. The request shall be signed by the State's Chief Executive Officer or by an individual authorized to apply for the SAPT or CMHS Block Grant on behalf of the Chief Executive Officer. SAMHSA will consider such requests for funds expended after the date of enactment of Public Law 106–310, October 17, 2000, in the first year for which additional funds are being added to the budget for such activities;

3. The State shall provide documentation that supports its position that the funds were appropriated by the State legislature for authorized activities which are of a non-recurring nature and for a specific